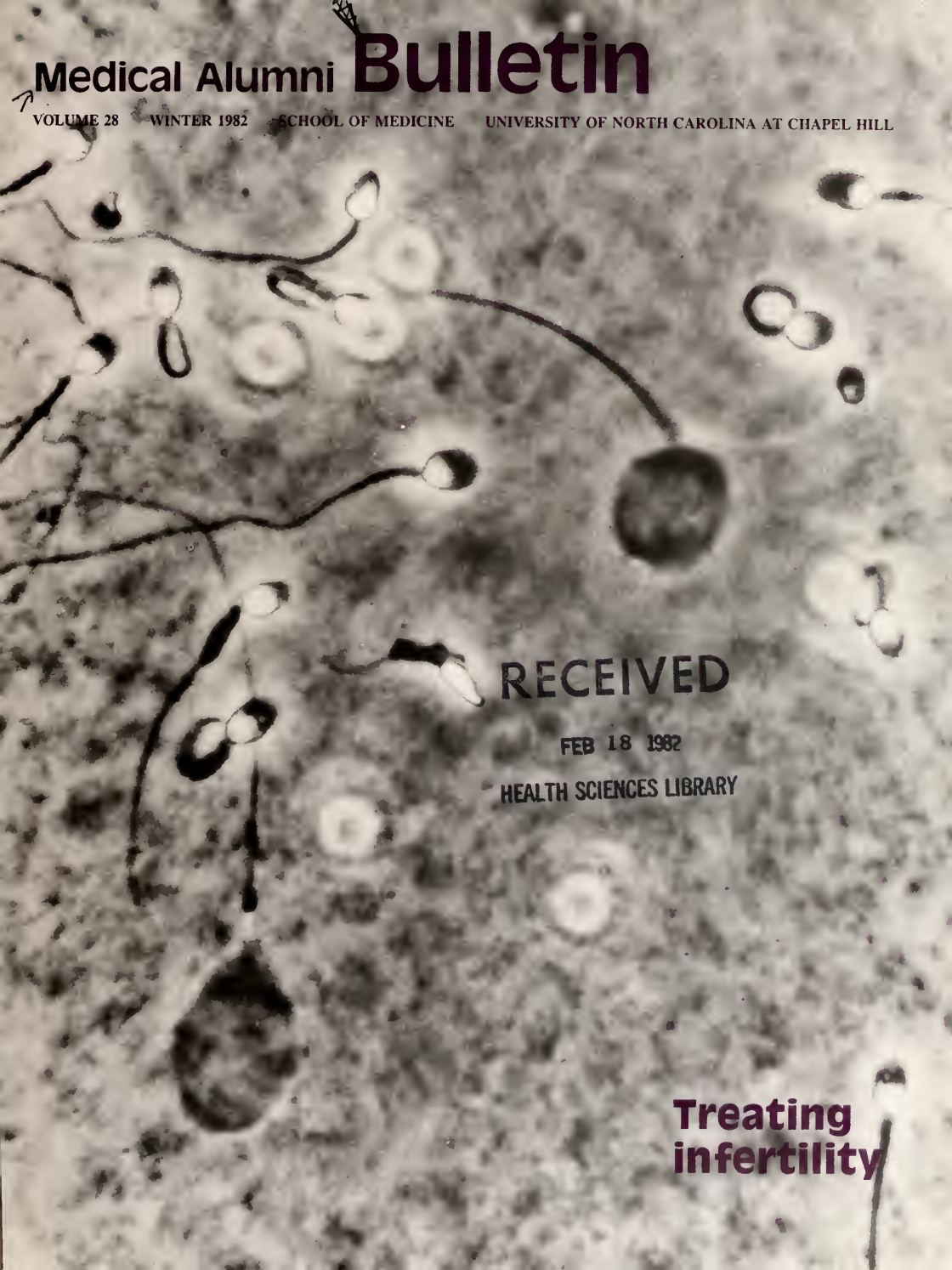
Medical Alumni Bulletin

VOLUME 28 WINTER 1982 SCHOOL OF MEDICINE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL



RECEIVED
FEB 18 1982
HEALTH SCIENCES LIBRARY

Treating infertility

On the cover

A human sperm penetrates a hamster egg in an in-vitro test that may make the diagnosis of male infertility easier and more precise. Research so far has revealed a close correlation between the proven fertilizing capacity of test subjects and the ability of their sperm to penetrate hamster eggs. Hamster eggs are used because of the difficulty of obtaining human eggs for test purposes. Dr. Jerry Hall, adjunct assistant professor in the UNC-CH division of reproductive endocrinology and fertility and scientific director of the Center for Reproductive Research and Testing, has been a leader in studying the validity and usefulness of this test in infertility research and diagnosis. For more on the School of Medicine's fertility services, see page 6.

Medical Alumni Bulletin

ADVISORY BOARD
Gerald W. Fernald, M.D., '60
Terry L. Fry, M.D., '73
Thomas R. Griggs, M.D., '69
Charles Harshaw Jr., M.D., '71
A. Myron Johnson, M.D.
George Johnson Jr., M.D. '50
Noel B. McDevitt, M.D., '64
Mary Margaret McLeod, M.D., '32
Paul L. Munson, Ph.D.
William S. Pollitzer, Ph.D.
William B. Wood, M.D., '56
Chairman
William B. Blythe, M.D., '51
ex officio
Marvin M. McCall, M.D., '56
ex officio
John W. Stokes
ex officio
Shahane R. Taylor Jr., M.D., '59
ex officio

EDITOR
John W. Becton

CONTRIBUTING EDITORS
Kathy Bartlett
Dick Broom
Mimi Minkoff

DESIGN
Nancy Raasch

EXECUTIVE EDITOR
John W. Stokes,
Director, Medical Center
Public Affairs

The *Medical Alumni Bulletin* is published quarterly by the UNC-CH Medical Alumni Association, Chapel Hill, N.C. 27514. Postage is paid by the non-profit association through U.S. Postal Permit No. 24. All correspondence should be addressed to the editor at N.C. Memorial Hospital 204H, Chapel Hill, N.C. 27514

Contents

Time travelers 2

Curriculum review is under way 5

Seeking to unravel genetic mysteries 11

Shorter treatment effective 13

New tools for cancer diagnosis 20

Behind the lines

There have been a few changes made in the schedule for Medical Alumni Weekend this year. We think the revised schedule may allow more of you to participate.

The weekend will be April 2-3, beginning Friday evening, April 2, with reunions of classes whose year of graduation ends in 2 or 7, as well as the annual meeting of the Manning-Berryhill Club. The annual Medical Alumni Association business meeting will be held Saturday morning, April 3, followed by a luncheon and scientific sessions.

The highlight of the medical alumni year, the Annual Alumni Banquet, will be Saturday evening, April 3. The Medical Alumni Association will present its Distinguished Faculty Award and the School of Medicine will present this year's Distinguished Service Awards.

We hope you will join us in Chapel Hill for Medical Alumni Weekend. Can you think of a better place to be the first weekend in April?

Here's a happy ending for a story which appeared in the Bulletin a year ago.

The winter 1981 issue carried a story about "The Medical Instruments," the medical student chamber music group. As we reported at that time, the group needed a piano of its own, both for rehearsals and for concerts within the medical center.

Since then they have been given a piano and a financial contribution for repairs and additional equipment.

Few infertility treatment centers offer the clinical breadth represented by the division of reproductive endocrinology and fertility at the School of Medicine. Our cover story this issue consists of reports on the work of three members of this division.

Among the medical alumni featured in this issue are Robert D. Croom III, M.D. '64, a member of the Cancer Research Center here, and Jacob A. Lohr, M.D. '67, a pediatrician at work just north of here in Charlottesville. Each has some interesting things to say about recent advances in their respective specialties.

Three other alumni, all members of the class of 1981, were interviewed about an elective month they spent in Egypt as fourth-year students. That story begins on the next page.

—JWB

Young physicians enthusiastic a

bout experiences in Egypt

"It was like going back to another time. The facilities, the kinds of diseases, the way patients and physicians related—all were much like the turn of the century in this country."

By participating in an exchange program with the University of Alexandria, Egypt, three members of the class of 1981 got a look at diseases they previously had only heard about. They also witnessed the value of the physician's diagnosis when one cannot depend on technological analyses. And the then fourth-year medical students benefited from the affection many Egyptian citizens feel for Americans in general and people from the UNC-CH School of Medicine in particular.

The exchange program was started in 1979 by the late Dr. Merrel D. Flair. "He had an interest in international education and cultural exchange, as well as friendships with members of the faculty at the University of Alexandria medical school," said Dr. Frank T. Stritter, Flair's successor as director of the Office of Research and Development for Education in the Health Professions (formerly, the Office of Medical Studies).

"The school (UNC-CH) has continued this interest," Stritter said. "We had sent seven faculty members and five residents when the first three students—Ruth and Paul Parker and Alix Lovitz—went to Alexandria in February 1981. A fourth student, Weldon Jordan, went last April."

Stritter noted that 10 physicians and one student from Alexandria have visited Chapel Hill through the exchange program. "We hope they'll send more students in the future," he added.

Prospective participants here apply to an advisory committee chaired by Dr. Harry Gooder, professor of bacteriology and immunology.

"They have to have some kind of study project they want to undertake," Stritter said. "It's rather competitive. Some 80 faculty members wanted to go this year, but we could only send about five. The four students who went last year were selected from among many who expressed varying degrees of interest. We tried to pick students who didn't have a lot of international experience."

Lovitz said she became interested in the program when an Egyptian medical student visited here.

"Nashwa Kheidr, a third-year medical student, was here for a one-month elective in endocrinology. As co-president of the Whitehead Society, I spent some time showing her around and learned about the exchange," Lovitz said.

When she talked with Stritter about the program, Lovitz learned that it had been set up for students as well as faculty and residents. Her friends, the Parkers, also were interested, and all three applied.

They spent all of February in Alexandria and stayed two additional weeks to travel to other parts of Egypt and to Israel.

They observed striking differences and similarities between the health care systems of Egypt and this country.

There are four levels of health care in Egypt, they reported. The Ministry of Public Health, which refuses health care to no one, provides care through centers in both rural and urban settings throughout the country.

Middle class workers often have insurance coverage provided by their employers and are assigned to an insurance hospital for both in-patient and out-patient care.

The academic teaching centers are the third type of facility. The teaching hospitals are associated with the medical school at Alexandria and 10 others.

The fourth level of care is provided through the private hospitals. Patients who can afford the costs of their health care needs are treated in these small, neat, well-organized hospitals.

University faculty usually staff the insurance hospitals as well as caring for patients in the private facilities (where the physicians earn the largest portions of their incomes). Thus, one physician might chair departments in as many as four hospitals, teach medical students in the morning and hold a private clinic each evening.

"Their medical education system is similar to ours in some ways," Paul Parker said. "But medical students there don't have as many opportunities for clinical experience as we do."

Residents are trained in the insurance hospitals and in some private hospitals, but medical students are taught only in the university hospitals.

Another similarity is that lectures and textbooks in Egyptian medical schools are in English. Significantly different are the size of classes and the tracking of medical graduates.

"There are 1,300 in each medical class at the University of Alexandria," Ruth Parker said. "Only about 50 students from the top of each class stay on at the university, and once you leave the university, you can't come back. So only the 'upper crust' become university faculty members. It's a more elitist setup than ours," she said.

The patients in the university hospitals are those with the most serious illnesses. They are generally referred through the health system from local public health centers.

"So the system is similar to ours in

Ruth Parker (left), Paul Parker and Alix Lovitz pose in front of a statue of the first dean of the medical school at the University of Alexandria, Egypt. They spent a month studying there during their fourth year as UNC-CH medical students.

Ruth and Paul Parker and Alix Lovitz said the most serious public health problem they observed in Egypt was widespread schistosomiasis caused by a fluke which infests irrigation canals, such as this one, throughout the country.

this way—but the diseases there tend to be more severe," Paul Parker said.

Paul Parker spent most of his time in Alexandria working in a pediatric surgery suite. Lovitz and Ruth Parker worked with residents on a medicine ward and spent a week in a pediatric hospital. It was the first time any of the three had seen children with polio.

They also observed active rheumatic heart disease, classic malnutrition, diphtheria, tetanus, typhoid, rickets and scurvy—"things we had heard about but not seen."

One of the most serious and widespread problems is schistosomiasis, a disease caused by a fluke, or parasite, which infests rivers and canals throughout the country. The effects of this infection on the liver and blood are similar to the effects of alcoholism, Paul Parker observed.

Alcoholism itself is not a problem, because alcohol is forbidden in Moslem countries such as Egypt. But Parker found the comparison interesting. "Maybe alcohol is our blood fluke," he said.

The Americans were able to observe different levels of care within the Egyptian system. In addition to their work in university hospitals, Paul Parker was able to go to private hospitals in the afternoons (unlike Egyptian students) and Ruth Parker and Lovitz spent two weeks in public health rural clinics. "It gave us a sense of how they reach people through their health system," they reported.

"We learned a great deal of good clinical medicine," Lovitz said. "They don't have the level of technology we have. They depend more on their five senses for diagnosis."

Ruth Parker agreed. "They had impeccable diagnostic techniques. It gave us a chance to see what you do when you don't have the tests," she said.

"It was much like the turn of the century in this country, except that they have antibiotics," Lovitz said. "It may take them another 30 years to get where we are."

Throughout their stay in Egypt, the three American medical students were well received.

"We found the Egyptian people to be very warm and receptive to Americans," Paul Parker said. "They were glad to have us there."

The Egyptian people tend to be very pro-American, he said, largely because of President Carter's active role in bringing about peace with Israel. They want their money to be spent on economic development, rather than for military purposes, the students reported.

Being from the School of Medicine in Chapel Hill was an additional advantage. Physicians in Alexandria who had become friends with UNC-CH faculty went out of their way to make the students feel welcome.

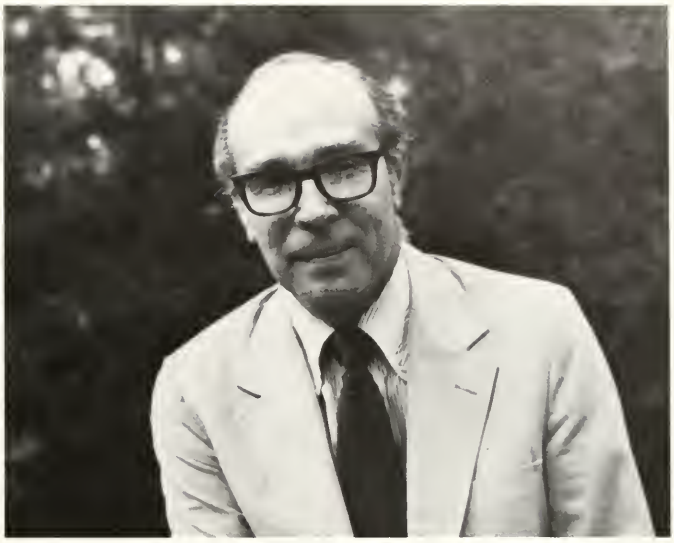
Visitors to Chapel Hill from Alexandria have had professional interests ranging from burn care to education to microscopy.

"In September, Dr. Rafik Zaher, dean of the medical school at the University of Alexandria, and his associate dean, Dr. Hassenin, spent a week here," Stritter said.

"The enthusiasm of our students who have gone to Egypt has been unbelievable," Stritter said. "They were well received because of the hospitality of Egyptian/Mideastern culture and the friendships between individuals here and in Alexandria.

"I wish we could send more."□

Dean's Page



In recent months, we have launched a broad review of the curriculum of the School of Medicine which leads to the M.D. degree—the first in some 13 years. I would like to describe something of the process which is under way and to solicit suggestions from alumni and friends for referral to the Curriculum Review Committee.

The curriculum we now have in place was a result of an extensive and thoughtful review in the late 1960s. It has served us well insofar as we can judge by the solid competence of our graduates and in their performance in relation to graduates of schools with different curricula. But many things have changed since the late 1960s and, after some deliberation, the faculty decided that it was both timely and important to undertake another review and redesign of the curriculum.

Every curriculum represents to some extent a compromise of competing values and goals. The compromise is rarely, if ever, entirely satisfactory to anyone and most always quite unsatisfactory to some. Currently, there are real questions as to the most appropriate preparation for medical school and the most appropriate criteria for admission. There also are real questions as to the content and sequence of that part of the education of the physician which we designate "medical school" in relation to the content and sequence of those parts which are taken in undergraduate school and during the residency. Not infrequently I am challenged by a dedicated advocate of some topic asking how in conscience I can be dean of a medical school which does not adequately include topic A or topic B or topic C in its curriculum. I now have a list of more than 30 substantial topics for which a reasonable case could be made. On the other hand, our students already are expected to master bodies of knowledge and skills of far greater scope and complexity than did previous generations. There are, of course, many other needs, opportunities and forces acting to encourage reconsideration of the curriculum.

Ultimately, the review process will involve most of the faculty and many of the students and any changes which are proposed will be carefully reviewed and approved by the entire faculty. I have appointed Drs. Romulo Colindres and William Mattern as co-chairmen of the review. Seven subcommittees will address the following topics: (1) Subcommittee on Undergraduate Preparation and Student Selection, Drs. Larry Churchill and Lamar Ekbladh, co-chairs; (2) Subcommittee on Curriculum Years 1 and 2, Dr. Fred Sparling, chair; (3) Subcommittee on Transition from Basic Sciences to Clinical Sciences, Dr. Colin Hall, chair; (4) Subcommittee on Curriculum Years 3 and 4, Drs. Luther Talbert and T. Kenney Gray, co-chairs; (5) Subcommittee on Electives and Advisory System, Dr. John Perkins, chair; (6) Subcommittee on Evaluation of Student Performance, Drs. Frank Wilson and Cary Cooper, co-chairs; (7) Subcommittee on Evaluation of the Curriculum, Dr. Robert Fletcher, chair. These subcommittees will have the support of consultant groups with special expertise as follows: (1) Bedside Expertise - Clinical Skills and Clinical Judgment; (2) Physician Scientists; (3) Care of the Elderly; (4) Drug and Alcohol Abuse; (5) Environmental Medicine; and (6) Student Concerns.

A small coordinating committee will be responsible for determining the scope and order, for integrating the entire process and for weaving the final product. This coordinating committee will, of course, be chaired by Drs. Mattern and Colindres. Members of the coordinating committee are Drs. George Johnson, Fred Sparling, Mary Ellen Jones, Eugene Mayer, Susan White, Luther Talbert and Frank Stritter, and fourth-year medical student Vincent Kopp. The coordinating committee will have the support of a panel of consultants composed of many of our most experienced teachers.

We are embarked on a substantial effort to improve the education of our medical students. I look forward to learning the reactions of alumni as our thinking and planning matures. In the meantime, as we begin the process I would welcome, and Drs. Mattern and Colindres would welcome, any thoughts, reflections, judgments, or suggestions from alumni.

Stuart Bondurant

Fertility specialists at UNC-CH of

In the mid-70s, when the specialty of obstetrics and gynecology in this country was separated into subspecialties, Dr. Luther Talbert and a few other ob-gyn faculty members in the School of Medicine had an opportunity to concentrate their efforts in an area that had always been of paramount interest to them. They formed the division of reproductive endocrinology and fertility, with Talbert as chief, and began to recruit other faculty members to increase the quality of both patient care and research.

Now, less than 10 years later, few infertility treatment centers offer the clinical breadth represented by the program in Chapel Hill. As a result, couples who have been unable to have children are referred here by physicians in all parts of the state and throughout the Southeast. And for every couple that comes to Chapel Hill for evaluation and treatment, many others benefit indirectly from the expertise of the specialists here.

"Our job is not just to treat patients who are referred to us, but to help doctors around the state in the treatment of their patients," Talbert explained.

"A lot of infertility problems can be handled perfectly well by the woman's doctor locally, and there's no need for her to drive all the way to Chapel Hill for us to see her. We'll discuss the problem with the doctor in Asheville or Goldsboro or wherever, and together arrive at a solution."

New faculty members who have joined the division of reproductive endocrinology and fertility in the last few years have increased the number and scope of services available, carrying specialization a step farther.

"We didn't feel we could offer optimal quality if all of us tried to do everything," Talbert said. "So now each of us concentrates mainly on just one or two aspects of treating infertility. This is important," he continued, "because in order to keep your skills sharp in tubal surgery or ovulation induction, for instance, you need to really focus on it and do it often."

Following are reports on how three of the fertility specialists at the School of Medicine are helping couples have children.

Making new life possible

When Dr. Shailaja Raj goes into surgery, it isn't to save lives, but to make it possible for lives to be created.

Her patients are all young women who want to have children. But they are unable to conceive because of blocked fallopian tubes.

Raj, an assistant professor of obstetrics and gynecology here, is one of only three or four physicians in the state who specialize in surgically reopening blocked fallopian tubes. Because the tubes are so thin and delicate, the operation is done under a microscope.

"To perform microsurgery, you need to have very steady hands, a lot of patience and good eyesight," Raj said. "You also need to do the procedure fairly often so that your fingers stay dexterous and you maintain your skill."

Raj performs about 50 tubal surgery procedures a year at North Carolina Memorial Hospital.

The most common cause of blocked fallopian tubes is infection and inflammation of the reproductive organs.

"The tubes can be damaged so badly that they cannot transport eggs, or sperm cannot get through to meet the eggs," Raj explained. "Once this happens, it is a permanent condition, unless surgically corrected. What we do is remove the damaged section of tube and reattach the healthy ends."

Raj not only repairs damage wrought by disease, she operates on women who have been sterilized by having their fallopian tubes burned or clamped shut, but later decide they want a child. She said that about one percent of women who undergo tubal ligation (sterilization) eventually come back to have the procedure reversed.

"Some of them have divorced and remarried and want to have a child with their new husband," Raj said. "Others may have had a difficult time with an early pregnancy and didn't want any more, but now are more mature and confident. A few have lost a child and, because of that, they want another one."

Nationwide, about 60 percent of women who have had their tubes reopened become pregnant within two years. Last year Raj operated on 11 such women and eight of them are pregnant or already have a child—a success rate of 73 percent.

She said she has achieved this high success rate partly because she tries to correct all other problems that could cause infertility before performing surgery. She checks the husband's sperm count, makes sure the woman is ovulating regularly and that she is producing enough mucus to keep sperm alive. Raj also makes sure the woman has enough healthy tube left to make surgery worthwhile.

fer optimal quality

She noted that it is far easier to perform tubal surgery on women who are within their ideal weight range.

"This is because of the technical problem of getting the microscope into the belly," she explained. "You need to get fairly close to what you're looking at and still have room for your hands to work. If the abdominal wall is too thick, this becomes a problem. So we are pretty strict about insisting that patients be near their ideal weight."

Raj told of one woman who came in for surgery after losing 125 pounds in only a year.

"It's such a pleasure to work with someone who is that committed to it," she said. "It somehow makes you feel more responsible; you really want to be able to help them."

Raj noted that many women who investigate fallopian tube surgery do not go through with it, primarily because of the emotional, financial and time commitment required.

"It is difficult enough to go through a long, extensive work-up and surgery when you are sick and hurting. Can you imagine the motivation it takes when you are basically hale and healthy?

"It shows that if a woman is deeply determined to have a baby, she will do just about anything."

They can have 'pretty spectacular' children

"It's not shocking or bizarre to me, but it might be to some people. For me, it's very logical, because the end result is worth any means."

For Rebecca Parker, the end result is a baby. The means is artificial insemination.

Rebecca (not her real name) and her husband have been trying to have a baby for about three years. Last year their local doctor referred them to the infertility clinic at North Carolina Memorial Hospital. Tests showed that Rebecca's husband had a low sperm count, which meant that her chances of getting pregnant were small.

So, for the past seven months, she has been visiting the clinic twice a month to be inseminated with donor sperm.

"It wasn't a difficult decision for us to make," Rebecca said. "If you can't get pregnant the normal way, then your options are pretty limited. It hasn't caused any problems between us, because we are both so totally committed to having a child."

Increasingly, couples who are un-

Dr. Shailaja Raj prepares to operate under a microscope to reopen a young woman's blocked fallopian tubes. Raj, one of a number of fertility specialists at UNC-CH, performed this procedure on 11 women last year. Of these, eight have become pregnant.

able to have children because of male infertility are considering donor insemination. Last year about 75 couples were treated in N.C. Memorial Hospital's insemination program, one of the busiest and most successful in the country.

"Ours is certainly the largest one between New York and Miami," said Dr. Jaroslav Hulka, director of the program.

Hulka, a fertility specialist, is a professor of obstetrics and gynecology in the School of Medicine.

He said sperm donors for the insemination program are mostly medical students. They are carefully screened for good medical and genetic backgrounds and, in most cases, donors are chosen whose hair color, eye color and other physical traits are compatible with those of the patient's husband.

Hulka said donors also are selected for their sperm's ability to survive freezing, "so we can maintain a frozen sperm bank and have a good, varied supply ready to use when needed."

He explained that women who receive donor sperm also undergo a thorough genetic screening. "If there is a high incidence of hypertension, diabetes or some other serious problem in her family, we will try to find a donor who has none of those problems in his family history."

The insemination procedure is not painful and only takes about 10 minutes. It is generally done twice a month, during the time in the woman's cycle when conception is most likely to occur. But even with precise testing and timing, there is no guarantee of pregnancy. In fact, the success rate for each insemination is only 10 percent.

"To put it another way," Hulka said, "we figure that if a woman comes for five months, there's a 50-50 chance that by the end of that time she will be pregnant." For some women, it takes 10 months or longer, and some never become pregnant.

Dr. Jaroslav Hulka is director of N.C. Memorial Hospital's artificial insemination program.

According to Hulka, a significant number of couples drop out of the program after a few months because of the strain.

"These couples are really on an emotional roller coaster. Every month they get their hopes up and then are bitterly disappointed when she doesn't get pregnant."

Rebecca Parker knows the feeling.

"It is very difficult to psych oneself up every month and to keep believing that you will get pregnant," she admitted. "Sometimes the entire process seems futile and there are a lot of emotional lows. So, it is tremendously important for anyone undergoing insemination to receive a lot of encouragement."

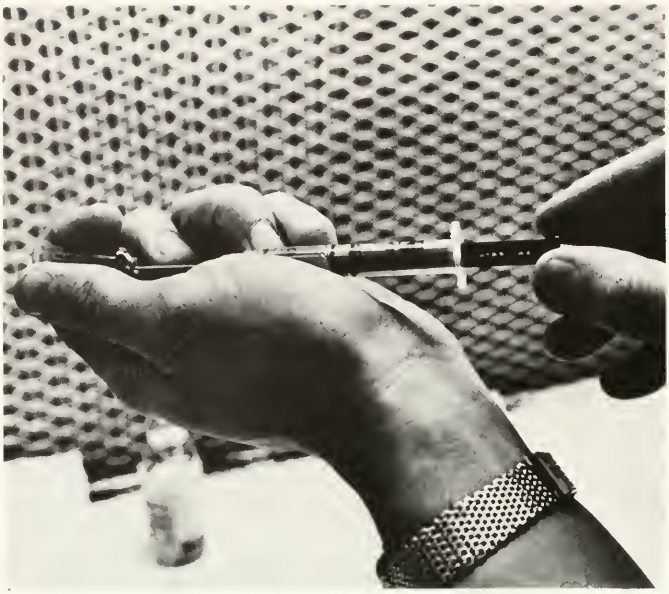
Pam Smith, a registered nurse and clinical instructor in the medical school's ob-gyn department, works closely with patients and their husbands and performs most of the insemination procedures. She said most of the couples she sees are "super, super people who have strong relationships and a very positive attitude."

Like most prospective parents, her patients are primarily concerned that their baby be healthy and normal.

"We go into more depth in genetic screening than most of the other insemination programs around the country," Smith said. "So, our couples are very comfortable and reassured, because they know that everything possible is being done to ensure the health of their child."

The identities of sperm donors and recipients are closely guarded secrets and are never even revealed to each other. Hulka said couples are strongly advised not to tell anyone—not even their families—that they are in the insemination program, "because there is absolutely no reason for a child to ever know he was conceived in this manner."

Rebecca Parker sees another good reason for secrecy: "It could be tough for my husband's parents to be comfortable with the fact that the child might not be his. They want to be able to claim this child as their grandchild, too."



If the child the Parkers eventually have is like most products of donor insemination, he or she is likely to be "pretty spectacular," according to Hulka.

"It's almost a built-in win system, once you achieve pregnancy," he said. "Donors are selected for brains and health. The parents are bright and devoted. And since they worked so hard to get the child, they're not about to blow it.

"With all of this going for them, the children should excel. And most of them do."

Fertility drug closely monitored

A woman who fails to become pregnant after taking fertility drugs prescribed by her local doctor shouldn't necessarily give up on having children, according to fertility specialist Dr. Mary Hammond.

Hammond says a type of treatment offered only at major medical centers can work for many women who do not respond to the more widely available fertility drugs.

About 40 percent of female infertility is caused by failure to ovulate. The most commonly used fertility drugs induce ovulation by stimulating the brain to produce hormones that stimulate the ovaries.

In four out of five cases, this type of treatment is effective; the women begin to ovulate and many eventually become pregnant.

For those relatively few who don't, Hammond says there is another type of fertility drug, called Pergonal, that works directly on the ovaries to trigger ovulation. Pergonal must be given in precise doses on a strict schedule, however, and the physician must be able to get test results of hormone levels in the blood the same day blood samples are drawn, a service that only a small percentage of medical laboratories can provide.

Close monitoring of hormone levels is necessary to prevent overstimulation of the ovaries that can lead to serious complications.

"Our main concern is that the ovaries can become cystic and quite large," Hammond says. "Even though this is a temporary condition without permanent effects, it can cause quite a bit of pain and nausea."

Hammond says there are a variety of methods for carrying our fertility therapy with Pergonal.

"Our system is essentially to try to recreate the menstrual cycle. Instead of giving medication in increasing doses until the patient ovulates, we try to set up a 28-day cycle. The patient comes in for five or six days of therapy, and if she fails to respond, we wait two or three weeks before starting again."

Hammond says patients receive injections of Pergonal on the first, third and fifth day of therapy. On the eighth day, a sample of blood is taken to test for the level of estrogen in the bloodstream. If the estrogen level is within a certain range, another medication is given to trigger release of an egg from the ovaries.

"The one-day hormone analysis that this requires just isn't available most places," Hammond explains. "You have to have access to a sophisticated medical center laboratory that is set up to provide this kind of service."

Hammond, an assistant professor of obstetrics and gynecology in the School of Medicine, says her patients go through an average of three or four cycles of therapy before they either become pregnant or decide to discontinue therapy.

If a woman does not become pregnant after six cycles, therapy is usually discontinued. After about six months, Hammond says, the chance of success is so small that it does not warrant the cost—about $200 a month—or the emotional strain of therapy.

"These women are under terrific stress," she says. "You're not only asking them to come in and get shots and blood samples; you're asking them to base all their hopes on what their estrogen level is on day eight. They are constantly wondering if this is their last month of therapy, if this is the month they'll become pregnant."

Hammond says about half the women who receive Pergonal therapy at N.C. Memorial Hospital become pregnant. The success rate isn't higher, she says, because some women with ovulation problems also have other difficulties that prevent pregnancy or their husbands are found to be subfertile.□

Focus has shifted, but curriculum members continue to seek to unravel mysteries

Although they have widely divergent interests and backgrounds, the members of the Curriculum in Genetics are united by a common goal—to study and unravel the mysteries of heredity.

The first graduate students entered a formal genetics training program at the University of North Carolina at Chapel Hill 20 years ago. Since that time, the program has grown and changed, both in scope and focus.

Under the chairmanship of Dr. John Borden Graham (C. Med. '40), the curriculum offers graduate students the chance to pursue a variety of research interests while working toward a Ph.D. in biochemistry, botany, biostatistics, zoology or genetics.

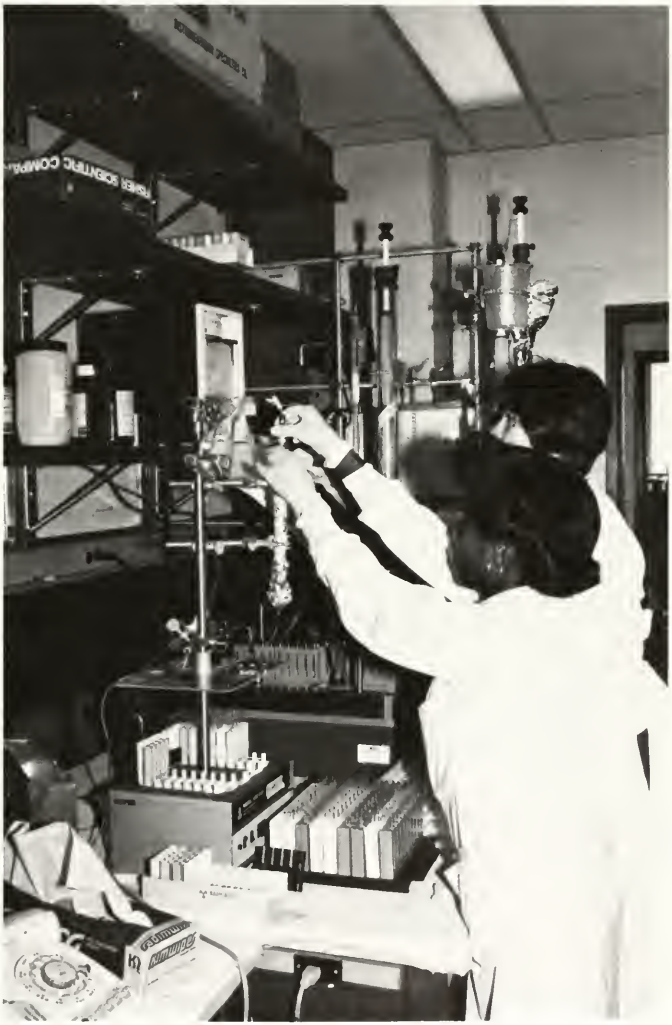
The curriculum brings together faculty members from the School of Medicine, the School of Public Health, and the departments of zoology and botany.

The first "trainees" in genetics began their studies in September 1961 after the University applied for and received a grant from the National Institutes of Health. Three of four original trainees finished their course work, research and theses and received doctoral degrees in biochemistry.

Dr. Lon Hodge is currently a professor of cell and molecular biology at the Medical College of Georgia, while Dr. Jim Karam is an associate professor of biochemistry at the Medical University of South Carolina. Dr. Terrence Yen is a research scientist with Eli Lilly in Indianapolis.

"During the first year," Graham said, "it became apparent that we needed a separate degree in genetics and Ann Shirley Henderson, now an associate professor at Columbia, received the first Ph.D. in genetics at the 1967 commencement."

To date there have been 44 Ph.D. degrees completed with support from various NIH training grants, 30 of them degrees in genetics.



Renata Horton, front, a fourth-year graduate student in genetics, and Linda Bradley, a second-year student, label an antibody with a radioactive isotope. This is one of the methods used to identify specific antigens.

Dr. Ken Bott, professor of bacteriology and a member of the Genetics Curriculum, discusses DNA sequence results with Linda Anderson, a third-year graduate student in genetics.

Graham said in the early days of the training program it was possible to support research by medical, college and even high school students but this is no longer possible because of NIH restrictions. Some 40 postdoctoral fellows also participated in the genetics program until funds were discontinued last year.

"As the curriculum has grown, particularly in the last five years," Graham said, "it has changed its focus. Our faculty is now very large, energetic, and strongly oriented toward molecular genetics. Our formerly strong program in human genetics has shrunk and the largest contingents of faculty and students are located in microbiology and zoology. We also have nine adjunct faculty members and several graduate students based in the National Institute of Environmental Health Science in the Research Triangle."

Graham, alumni distinguished professor of pathology, said the trend toward molecular genetics is widespread and even geneticists specializing in medical and human genetics are examining how they can use the molecular genetic approach and recombinant DNA technology.

Practical considerations are part of the reason for the switch to research with viruses and bacteria, Graham said. "The generation time of these organisms is a matter of days and minutes compared to fruit flies, which have a generation time of a month, and humans whose generation time is 25 years. Molecular genetics is quick and you don't have to kill a person to get your answers.

"Although molecular genetics of humans is quite different in detail from that of viruses, the principles are the same," he continued. "We're all still studying the transfer of information from DNA to RNA to protein to metabolism, whether it's in a virus or in a large, human population."

The genetics curriculum is not supported directly by the state but is strongly undergirded by the state through the salaries of its faculty. The program is administered by the School of Medicine while program quality is under the supervision of the Graduate School.

"By and large we've been a program that has largely supported itself," Graham said. "The 30 members of the curriculum occupy approximately 30,000 square feet and bring in about $1.5 million each year in research grants."

There are 26 students presently pursuing degrees, 23 of whom are candidates for a degree in genetics. Two-thirds of the students are women.

"The quality of our entering trainees has remained high," Graham said. He explained that students are recruited nationally and rank in the upper 15 percent nationally in GPA and GRE averages.

Because there is a strong emphasis on individual research, Graham said, the genetics curriculum is rather fluid with students able to pursue projects under the direction of a faculty member of their choice. There is no core curriculum or single qualifying exam, although all students are required to attend weekly colloquia and take a teaching methods course. Each student has an individually designed course of study and self-motivation is essential.

"We want people that can't wait to get to work in the morning," Graham said. "We don't expect them to work 14 hours a day, seven days a week, but if they did, they'd sure get a lot more done." □

Alumnus, colleagues find shorter treatment just as effective for lower urinary tract infections

Lower urinary tract infections that often plague young girls can now be treated by a shorter course of therapy, according to Dr. Jacob A. Lohr, M.D. '67.

Lohr and his colleagues at the University of Virginia Medical Center recently conducted a study in which they compared the effectiveness of the traditional 10-day treatment with three days of medication.

In a study of 49 patients, the researchers found that three days of treatment with nitrofurantoin, a urinary tract antiseptic, is as effective as 10 days of medication in curing uncomplicated lower urinary tract infections, also known as cystitis.

The shorter course of drug therapy offers patients two main advantages. "It is less expensive and also decreases the likelihood of toxicity because the patients will be on drugs a shorter time," explained Lohr, associate professor of pediatrics, at U.Va.

"Lower urinary tract infections occur in at least five percent of girls from first grade through high school," Lohr said, adding, "the infections are 30 times more common in girls than in boys."

Lohr described the infections as "uncomfortable, but not life-threatening." Symptoms include abdominal pain, fever and frequent and urgent urination.

"If left untreated, the little girls may be at some risk later to develop chronic kidney problems," the pediatrician said. "The infections need to be treated to relieve pain, but more importantly, to prevent polynephritis, a kidney ailment."

Recent studies on cystitis in adult women have shown that single high-dose therapy is a more effective way to treat lower urinary tract infections.

The adult studies, coupled with the U.Va. pediatricians' knowledge that "the urine of young patients was bacteria-free within 24 hours after starting treatment," prompted Lohr and his colleagues, Drs. Gregory Hayden, M.D. '72, and Richard W. Kesler, to reexamine the accepted 10-day method of treating infections in young girls.

Hayden is assistant professor of pediatrics, and Kesler is associate professor of pediatrics. Lohr and Kesler are co-vice-chairmen of the pediatrics department.

Lohr presented their findings at the 21st Interscience Conference on Antimicrobial Agents and Chemotherapy in Chicago in the fall.

The 49 girls who participated in the study range in age from 2 to 18 years, with 8 being the average age. Nearly two-thirds of them, or 29, had previous urinary tract infections.

All were treated with nitrofurantoin, which was used like an antibiotic and administered in a regular, not high, dose.

In conducting the two-year study, "all patients were given capsules containing nitrofurantoin macrocrystals for the first three days of therapy. The patients then received either nitrofurantoin macrocrystals or a placebo for an additional seven days," Lohr explained.

The results revealed that the infections of a randomly selected group of 26 patients were cleared up on the third day of therapy. Similarly, all 23 patients in the 10-day treatment group had sterile urine on the third day.

"We would recommend three days of nitrofurantoin macrocrystal therapy as a highly satisfactory short-course treatment regimen for symptomatic children presumed to have uncomplicated lower urinary tract infections," the pediatricians concluded.

They said they would select the three-day therapy over single-dose regimens in pediatric patients until larger studies with long-term followups are available.

Six-month follow-up studies at U.Va. Medical Center showed that girls who received the three-day treatment experienced basically the same number of relapses and reinfections as those who got the 10-day therapy, Lohr said.

The 26 patients in the three-day group had 7.7 percent relapses and 23 percent reinfection rate, while 23 patients getting the 10-day treatment showed a relapse rate of 8.7 percent and reinfections of 30 percent. □

Extracts

The Sigmund Sternberger Foundation of Greensboro has established an endowment to fund scholarships for students at the School of Medicine.

The foundation has made annual contributions to support Sigmund Sternberger scholars since 1970. The foundation's board of directors recently voted to perpetuate the scholarships by endowing them, according to Leah Louise B. Tannenbaum, chairman.

"It is our hope that the endowment fund will prove to be a more advantageous and flexible means for the foundation to assist the School of Medicine," she said.

The endowment was established with a recent $25,000 gift to the School of Medicine. Sternberger Foundation representatives said they hoped the endowment ultimately would be enough to yield an annual income of at least $5,000, the amount the foundation has contributed each year since 1970.

Sternberger scholarships are awarded to students from North Carolina who are genuinely interested in practicing medicine in the state. A priority is given to those from Guilford County.

The late Sigmund Sternberger was a prominent industrialist and a leader in civic, religious and cultural activities of Guilford County. He was devoted to assisting persons in his community who would not otherwise be able to reach their full potential.

A leader in the study of blood clotting disorders for more than three decades, the School of Medicine is expanding its study of thrombosis.

The Center for Thrombosis and Hemostasis has received a $2.9 million Specialized Center of Research (SCOR) grant from the National Heart, Lung and Blood Institute. Dr. Harold R. Roberts (M.D. '55), professor of medicine and pathology and director of the center, said the grant will be used over a five-year period to continue and expand studies on thrombosis.

"Diseases related to thrombosis are the leading cause of death," Roberts said. "The SCOR grant is a multidisciplinary grant which will enable us to build on what's already here and to expand the research of the center. A number of School of Medicine departments are involved, including pathology, medicine, biochemistry, pediatrics and surgery."

"Acyclovir appears to be a very potent anti-viral agent, specifically against herpes simplex and varicella zoster," according to Dr. James Peacock, an infectious disease specialist at the School of Medicine.

A number of acyclovir studies are ongoing at UNC-CH. The studies include the use of acyclovir in treating patients with primary genital herpes, mononucleosis, and immunocompromised patients with severe herpes virus infections.

The drug seems to be effective in primary genital herpes. Preliminary results suggest that acyclovir kills the actively replicating virus and thus may shorten the course of active disease. "A hoped for benefit of the drug," Peacock said, "is prevention of reoccurrence, but this remains unproven.

"In immunocompromised hosts," Peacock said, "similar evidence is available. Patients with immunocomprised infections due to herpes simplex and varicella zoster may have unusually severe and sometimes life-threatening disease. Acyclovir therapy often results in the dramatic improvement of lesions."

Burroughs Wellcome Co. discovered acyclovir, whose trade name is Zovirax. Other major centers conducting acyclovir research include Duke, Emory, the University of California at Los Angeles and the University of Washington at Seattle.

Visiting physician

A Wyeth Traveling Fellowship brought Dr. John Wagstaff of the United Kingdom to the United States for five weeks this fall. Here he and Elizabeth Wagstaff, his wife, relax for a moment in a busy schedule which included visits to several AHECs, Chapel Hill, Philadelphia, Denver, Seattle and Boston. One AHEC stop included a visit with Dr. Peter Ungaro of Wilmington, who had spent time with Wagstaff this summer, also under a Wyeth fellowship.

Extracts

Dr. Eugene S. Sandler, associate professor of dental ecology and pedodontics, has been appointed director of the dental clinic at North Carolina Memorial Hospital and director of the hospital's dental general practice residency program.

The appointment, effective Sept. 15, was announced by Dr. Raymond P. White Jr., chief of hospital dentistry at N.C. Memorial and Dr. Donald Warren, chairman of the dental ecology department.

Sandler has been director of dental services at the Orange County Health Department since 1979. He will continue to hold this position in addition to his new duties.

A native of Massachusetts, Sandler received his D.D.S. from New York University in 1958 and his M.Sc.D. and a certificate of advanced graduate studies in pedodontics from the Boston Universty School of Graduate Dentistry in 1966. His major research interests are treatment of exceptional children and community and preventive dentistry.

Sandler has been an associate professor at the UNC-CH School of Dentistry since 1979. He serves as a consultant in dentistry for North Carolina Headstart programs and project director of the Robert Wood Johnson Ambulatory Care Program which has set up two dental clinics in cooperation with the Orange County Health Department.

A relatively recent development in basic medical research, the flourescence photobleaching technique, was the topic of an international workshop Oct. 25-29 at the School of Medicine.

"The UNC department of anatomy and laboratories for cell biology have adopted a plan to host an international workshop in some area of contemporary biology each academic year," said Dr. Charles R. Hackenbrock, chairman of anatomy and director of the department's laboratories for cell biology.

The first departmental workshop, which was organized by Dr. Kenneth A. Jacobson, associate professor of anatomy, brought together people, for the first time, who have been working on the photobleaching technique to share the results and the interpretation of their research.

The approximately 60 participants were drawn from Canada, Europe, Israel and the United States, with an additional 10-15 from the University.

Funding for the workshop was provided by the School of Medicine, Burroughs Wellcome Co., the National Science Foundation and the U.S. Army Research Office.

Dr. Mary Ellen Jones

Dr. Raymond P. White Jr.

Two faculty members of the School of Medicine were elected this fall to the National Academy of Sciences' Institute of Medicine.

Dr. Mary Ellen Jones, Kenan professor and chairman of the department of biochemistry and nutrition, and Dr. Raymond P. White Jr., professor of oral surgery and associate dean of the medical school, were among 50 new members of the institute, bringing its total active membership to 371.

Jones, a distinguished biochemist, is a specialist in metabolism and its regulation. In 1955 she and Drs. Leonard Spector and Fritz Lipmann, both of Rockefeller University in New York, discovered carbamyl phosphate, a compound essential to all living cells.

She is the first woman to hold a Kenan professorship at UNC-CH and the first to chair a department in the School of Medicine.

White, who serves as an associate chief of staff at North Carolina Memorial Hospital, was dean of the School of Dentistry from 1974 until August 1981. During his tenure the school continued to be recognized as one of the leading institutions of its kind in the nation. In 1980 it received one of the highest evaluations ever given by the American Dental Association's Committee on Dental Accreditation.

He has been active in national scientific organizations and was the American Society of Oral Surgeons' Committeeman of the Year in 1976. White also has been a prolific researcher and author.

A third-year psychiatry resident at North Carolina Memorial Hospital has been selected as a Falk Fellow of the American Psychiatric Association.

Dr. Clifton R. Tennison Jr. will work on a committee and attend meetings of the association for two years to observe how the association operates.

Tennison was one of 12 residents in the nation chosen by the Maurice Falk Fellowship Committee. About 55 residents were nominated for the honor.

This is the sixth consecutive year that a N.C. Memorial resident has been named a Falk Fellow.

Extracts

Emergency room secretary Judy King types a message to a deaf patient at home. Head nurse Linda Briggs waits to find out if the patient needs emergency assistance or medical advice.

A special instrument that allows deaf people to communicate by telephone recently was installed in the emergency room at North Carolina Memorial Hospital. Now any deaf person with a similar device can call the hospital for emergency assistance or medical advice.

The instrument, called a teletypewriter, is connected to a telephone in the emergency room. When the phone rings, the emergency room secretary places the receiver in a cradle on the typewriter and types the word "hello."

Immediately, "hello" is printed on the display screen of the caller's teletypewriter. Then the caller types his or her message, which can be read by nurses and physicians at the hospital. An entire conversation can be carried on between a deaf person and hospital personnel, without a single word being spoken.

Walter Harris, emergency room administrator, noted that the typewriter is small and lightweight, so deaf persons can carry it with them. The typewriter can be attached to any telephone.

"We have no idea how many deaf people in the community might own one of these," said Linda Briggs, emergency room nurse supervisor. "But those who do, now have a way to get in touch with us whenever they need us."

The number for the emergency room's teletypewriter is 966-2453.

Scientists at the University of North Carolina at Chapel Hill have found new evidence that only one or two episodes of heavy drinking by a woman early in pregnancy can seriously damage her unborn child.

The evidence, which comes from animal studies, indicates that the condition known as fetal alcohol syndrome may start as early as the third week after conception, well before most women suspect they are pregnant.

Drs. Kathleen Sulik, assistant professor of anatomy, and Malcolm Johnston, professor of orthodontics and anatomy, conducted their experiments on laboratory mice. Their results were published in the Nov. 20 issue of the journal Science.

"Most scientists who study alcohol-induced birth defects have been concerned with chronic exposure to alcohol, but with that approach it has been impossible to pinpoint the stages in pregnancy when injury occurs," Sulik explained. "Most of them have believed that if you damage the embryo very early in development, then it cannot survive."

For the first time, she and Johnston have shown that mouse embryos can survive early injury by alcohol and be born with subtle defects in appearance remarkably similar to those seen in human fetal alcohol syndrome.

Sulik said the new findings confirmed and expanded on studies by Dr. William Webster, a scientist at the University of Sydney, Australia. Webster announced last year that even a brief exposure to alcohol could cause very severe malformations in mice that were not commonly seen in fetal alcohol syndrome.

"We believe this work gives us a good animal model for examining the defects of the syndrome and for learning whether other drugs can have similar disasterous results early in pregnancy," she said.

Extracts

The American Cancer Society has renewed an Institutional Research Grant to UNC-CH.

The $55,000 awarded is 22 percent higher than the previous year's award, according to Dr. Mary Ellen Jones, chairman and professor of biochemistry who chairs the Institution Research Grant.

The American Cancer Society makes funds available specifically to support innovative cancer research projects.

The Cancer Research Center has been awarded $719,247 in a renewal of its support grant from the National Cancer Institute.

The award is part of a three-year renewal grant approved for the center and represents more than a doubling of funding from the previous year.

"This award was made after a very thorough and critical review by leading cancer researchers on the basis of the great promise of the Cancer Research Center at the School of Medicine at UNC-CH," said Dr. Stuart Bondurant, dean of the School of Medicine. "The award is both a tribute to the substantial accomplishments of the past and an expression of confidence in the results of the work of the future."

Center director Dr. Joseph S. Pagano said, "The new funding will allow the center to expand and strengthen its clinical and basic science cancer research programs, particularly in the areas of cancer epidemiology, drug development and cancer cell biology."

The Cancer Research Center was established as one of a network of specialized cancer centers throughout the country when it was awarded a core support grant from the National Cancer Institute in 1975. The center, under the direction of Pagano, began with a faculty of 16 and has expanded to 48 faculty members based in departments in the schools of medicine, pharmacy and public health. More than 100 cancer scientists in the UNC-CH medical center and institutions in Research Triangle Park also are affiliated with the center.

In 1984 cancer researchers expect to occupy a new research building on the UNC-CH campus, the Lineberger Cancer Research Center. □

Nurses for a day

North Carolina Memorial Hospital Executive Director Eric B. Munson and William D. Petasnick, director of operations, got a chance recently to find out what it's like to be a new ambulatory care staff nurse. They received an orientation to ambulatory care areas as "nurses for a day." Immediately below, Munson gets a lesson on how to use the POISINDEX from Patricia Ross during his visit to the pediatrics screening and acute care areas. In the lower photo, Petasnick prepares to observe a breast biopsy on a male patient after scrubbing up at the minor operating room. Linda Ross was responsible for the orientation in this area.

Class Notes

40s

Walter C. Barnes, C. Med. '46, is chairman of the Board of Trustees of Texarkana Community College and vice-councillor of the Southwestern Surgical Congress.

C. Roy Rowe Jr., C. Med. '47, has given up surgical practice and is now a full-time emergency physician and enjoying it immensely. His sons have become an architect, a Methodist minister and a student of sports medicine.

50s

Barbara Jordan, M.D. '54, is a psychiatric consultant for the Southeastern Regional Mental Health Center of Lumberton.

John L. McCain, C.Med. '50, has been awarded the National Volunteer Service Citation of the National Arthritis Foundation.

John W. Foust, M.D. '55, is first vice president of the N.C. Medical Society and president-elect of the Mecklenburg County Medical Society. He also is serving as second vice president of the N.C. Society of Otolaryngology, Head and Neck Surgery and membership chairman of the American Society of Ophthalmologic and Otolaryngologic Allergy.

Ernest H. Brown Jr., M.D. '57, was incorrectly identified as Edward H. Brown in this section of the last issue of the Bulletin. The editors regret the error.

60s

Allen H. Moore Jr., M.D. '62, has been promoted to colonel and assigned as chief, Aerospace Medicine, Air University. He is director of the Combat Casualty Care Course at Fort Sam Houston, Texas and is certified in advanced cardiac life support and as an instructor in advanced trauma life support. He has been awarded the Honor Medal of the Society of Portuguese Orthopedists and Traumatologists.

Bruce A. Phillips Jr., M.D. '62, has a private practice in internal medicine in Elizabethtown. He is the chief of staff at Bladen County Hospital and a member of the hospital's executive board. He is also charter president of the Optimist Club in Elizabethtown.

Mario M. Stone, IIS '62, attended the Mexican Orthopaedic Association Convention Oct. 5-9 in Michoacan, Mexico.

Edgar G. Gallagher, M.D. '65, is a surgeon associated with the Onslow Surgical Clinic in Jacksonville, N.C.

W. Beverly Tucker, M.D. '66, recently was elected second vice president of the Seaboard Medical Association of Virginia and North Carolina.

70s

Michael M. Moore, M.D. '70, recently was elected president-elect of the American Heart Association, Virginia Affiliate, at the group's 5th Delegate Assembly in Alexandria. Moore also received the group's Special Program Award "for his energy, enthusiasm and leadership which have given new life to heart programs in Virginia." He serves as chairman of the affiliate's Medical and Community Program Committee which oversees all heart programs in the state. Moore is a nephrologist in private practice associated with the Danville Urologic Clinic.

Daniel L. Crocker, M.D. '70, has joined the Area L AHEC staff as oncology coordinator. He practices internal medicine, hematology and oncology, at the Boice-Wills Clinic in Rocky Mount and will be associated with the AHEC program on a part-time basis.

Robert B. Felder, M.D. '72, is spending a year doing research in the physiology department at the Royal Free Hospital School of Medicine in London, England. He is an assistant professor of medicine in the cardiology division at the University of Iowa College of Medicine.

W. Rodwell Drake Jr., M.D. '72, has been elected secretary of the Maria Parham Hospital medical staff. He practices with the Family Medicine Clinic in Henderson, N.C.

David Grimes, M.D. '73, has made another trip to Bangladesh and was made an honorary member of the Class of 1981, Emory University, the School of Medicine's highest teaching award.

William E. Bowman, M.D. '74, has joined George Clutts, M.D. in the practice of surgery in Greensboro. He has been appointed to the associate staff of the Moses Cone Memorial Hospital surgical service.

William D. Lee, M.D. '74, served as president of the medical staff at Morehead Hospital in Eden and as a member of the county mental health board and the county board of the American Heart Association. He reports that he has enjoyed teaching fourth-year UNC medical students in his practice this year.

Larry E. Warren, M.D. '74, is a clinic physician at Wake Medical Center in Raleigh.

J. Charles Jennette, M.D. '74, was a co-winner of the 1981-82 Jefferson-Pilot Fellowship in Academic Medicine at UNC-CH. The award, supported by a fund established by the Jefferson-Pilot Corp., provides funding to be used at the discretion of the recipient for support of scholarly endeavors. The active term of the fellowship is four years.

Charles H. Hicks, M.D. '76, has joined the department of medicine at the East Carolina University School of Medicine. He will conduct cardiac catheterization, angiography and echocardiography studies in the medical school's cardiac catheterization laboratory at Pitt County Memorial Hospital. His special research areas are left ventricular function in ischemic heart disease and the effects of exercise on the cardiovascular system.

Sol Zerden, M.D. '76, is completing a fellowship year in diagnostic radiology at the UAB Medical Center in Birmingham. Sol, Steffi, Arin and Matt all say "Roll Heels!"

Vincent E. Paul, M.D. '76, has been appointed to the associate surgical staff at Moses Cone Memorial Hospital. He joined Ronald Gioffri in Greensboro this summer in the practice of orthopedic surgery.

Thomas L. Speros, M.D. '76, has opened a family medicine practice under the name of the Washington Family Medicine Center in Washington, N.C. He previously was an assistant professor with the department of family practice at East Carolina University School of Medicine.

Randy Sue Ellis, M.D. '77, has been named medical director of the new emergency department of Our Lady of Mercy Hospital in Dyer, Ind.

Melinda C. Paul, M.D. '77, has been appointed to the associate staff of the Moses Cone Memorial Hospital pediatric service. She practices pediatrics with the Caswell County District Health Department.

John C. Trotter, M.D. '78, has been appointed to the associate medical staff of Moses Cone Memorial Hospital. He has joined Dr. David M. Kaplain in the Family Practice of Summerfield.

F. Daniel Jackson, M.D. '73, and **Elizabeth H. Jackson, M.D. '73,** of Cumberland, Md., have created a special memorial to the late Dr. Oscar L. Sapp III.

The Dr. Oscar L. Sapp Memorial Scholarship Fund, established by the Jacksons, will provide an annual scholarship for a rising medical student who has completed the clinical work of the third year and who has demonstrated financial need.

Dr. Sapp, who was a class advisor for the class of '73, was associate dean for alumni affairs and continuing education at the time of his death in 1978.

Class Notes

Rupert Ainsley, M.D. '78, has completed his residency in internal medicine at the University of Florida in Gainesville and moved to Sanford, N.C. to enter private practice. He and wife Margaret, a '74 UNC nursing school grad, are the proud parents of a son, Thomas Rupert, born in August. Ainsley reports that he is "looking forward to being in Tar Heel country again!"

Byron Walthall, M.D. '78, reports that he and wife **Nancy Teaff, M.D. '78,** are still in Michigan but coming back to North Carolina in late 1982. Byron is associate director of the Pontiac Family Practice Residency. Nancy is in her final year of ob-gyn residency at Wayne State University. They report they have seen **Karen Ogle, M.D. '78,** and her new baby Grace and have talked with **Susan Foreman, M.D. '78,** and **Dickey Rumley, M.D. '78,** about their new baby Aaron Lee born Aug. 4. Karen is in an academic practice in Lansing, Mich. Susan is in pediatric neurology and Richard is in an infectious disease fellowship in Jackson, Miss.

Gregory H. Tuttle, M.D. '78, completed his residency in family practice at Richland Memorial Hospital in Columbia, S.C. in June and took the family practice boards in Atlanta in July where he saw many med school classmates. After three weeks camping in the Canadian Rockies and the northwestern United States, he has settled into a friendly mountain community where he is serving as full-time emergency room physician at R.J. Reynolds Patrick County Memorial Hospital in Virginia.

Jeffrey D. Katz, HS '79, has been appointed to the associate staff, medical service at Moses Cone Memorial Hospital. He has joined Drs. LeBauer, Weintraub, Brodie and Patterson, P.A. Also appointed to the Cone associate staff, medical service was **Eric S. Neijstrom** who was an oncology fellow at N.C. Memorial. He has joined the Greensboro practice of Drs. John A. Lusk, Kenneth S. Karb and Murphy S. Townsend.

Paul R. Woodard, M.D. '79, will complete his residency in anesthesiology at N.C. Memorial in June and plans to join Wake Anesthesiology Associates in July.

80s

Donald A. O'Neill, HS '80, has been appointed an assistant professor of surgery in the UNC-CH School of Medicine. He comes to the University from Massachusetts General Hospital where he was an associate in reconstructive orthopaedic surgery.

Thomas M. Bond, M.D. '80, writes: "Fell in love on the ski slopes of Colorado with a good ole' N.C. girl. Married in October."

Tim Viser, M.D. '80, reports that he was "selected" into the U.S. Air Force after completing his internal medicine internship at Dartmouth. He is a flight surgeon at Cannon Air Force Base in New Mexico. In addition to his duties as a physician to flyers and their families, he spends several hours a month in the right seat of the F-111D, a tactical bomber-fighter aircraft. Tim says his wife Karen and two-year-old son Matthew are rapidly adjusting to life in Clovis, N.M.

J. Thomas Newton, M.D. '81, is enjoying his family practice residency at Roanoke Memorial Hospital. He and wife Annette are the proud parents of a son, John Thomas Jr., born Sept. 26.

Joseph Cohn, HS '80, is continuing his interest in using computers to help the handicapped. He and wife Deborah have established a small workshop company called Input Output Research Enterprises to market switches and programs which they have designed to enchance communication by handicapped individuals. They recently exhibited their inventions in the Great Hall of the National Academy of Sciences. Cohn also works as an emergency room physician for Coastal Emergency Physicians of Durham.

Joan Lynette Thompson, '83, married James Stockton Perry of Raleigh Oct. 24. Her husband practices law with the Michael Swann and Associates firm in Raleigh. The couple is living in Raleigh.

Suzanne V. Sauter, M.D. '74, has been appointed medical director of the medical school's rehabilitation program office.

The appointment, effective Aug. 15, was announced by Dr. Stuart Bondurant, dean of the School of Medicine. Sauter, an assistant professor of rheumatology and immunology, had been acting medical director of the rehabilitation program since March 1980.

"With the growing burdens of chronic illness among our people and especially among the elderly, it is more important than ever before that we emphasize the full array of medical, physical, psychological and social rehabilitative service," Bondurant said. "Dr. Suzanne Sauter is an expert in many aspects of rehabilitation and she is an accomplished leader of the rehabilitative team. I am confident that she will give strong leadership to this important program."

As medical director, Sauter will be responsible for overseeing the rehabilitation program which includes a 17-bed inpatient unit at North Carolina Memorial Hospital, outpatient clinics and participation in the state's network of rehabilitation centers. The multidisciplinary program includes educational and research activities in addition to clinical work with patients at N.C. Memorial.

Deaths

Sara B. Mann, C. Med. '47, Eldridge, Calif.
Reginald G. Mason Jr., M.D. '62, Salt Lake City.
Joel Rothermel, M.D. '67, New York.
W. Howard Wilson, C. Med. '35, Raleigh.

New techniques aid cancer treatment

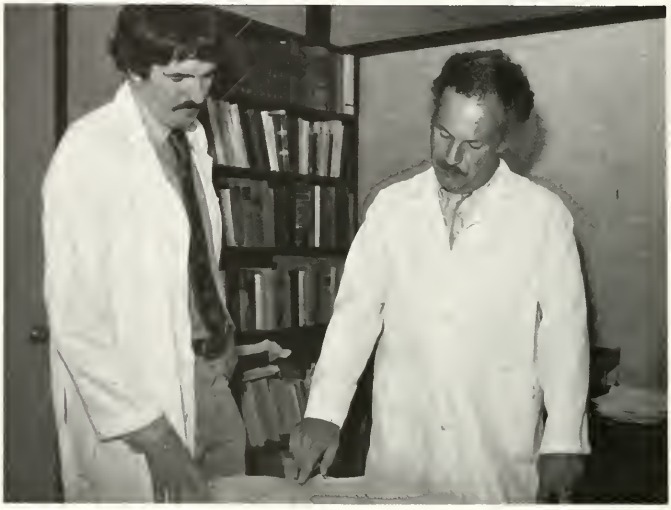
Tissue samples for the diagnosis of many cancers in the upper gastrointestinal tract have been available only through surgery until recently. New radiologic techniques now permit doctors to obtain cells for diagnosis without surgery and thus facilitate, in many instances, decisions for treating patients with some cancers, said Dr. Robert D. Croom III (M.D. '64), associate professor of surgery in the School of Medicine.

Technological advances in radiologic imaging and tissue sampling instrumentation now permit doctors to biopsy tumors deeply located within the abdominal cavity. Upper gastrointestinal endoscopy enables the nature and extent of some gastrointestinal tract cancers to be determined.

Additional benefits from endoscopy, Croom said, are the provision of a diagnosis by sampling portions of the malignant growth which further aids in preoperative decision making and planning regarding therapy and in providing better understanding by patients of their disease, and what may be necessary in their treatment.

"Other new diagnostic techniques involve ultrasound and computer technology to produce radiologic images which are used to direct thin needles into abdominal tumors from the skin surface," Croom said. "Cells from the tumor are then withdrawn and examined to provide a diagnosis. Such techniques are particularly useful in cases where there is a possibility that the cancer has already spread, and knowledge concerning this possibility becomes important regarding treatment decisions.

"Important therapeutic advances recently have been made in dealing with cancers which produce obstruction of the biliary tract and result in jaundice. When cure is no longer possible for these patients, significant improvement in the quality of their life may be obtained by special radiologic techniques which allow internal or external drainage of bile to reduce jaundice and relieve associated troublesome itching. Often a small plastic tube can be passed through the skin and liver into the blocked bile ducts where it then is pushed through the obstructing mass of tumor into the upper small bowel to permit bile once more to reach the intestinal tract by flowing through the plastic tube."



If all goes according to plan, cancer researchers at UNC-CH will move into the new Lineberger Cancer Research Center building by June 1984. Construction began this past December. Here, Dr. Joseph S. Pagano (right), center director, and Dr. H. Shelton Earp, assistant director, look over final plans for the Lineberger building.

However successful new diagnostic and therapeutic innovations may be, they are not without risk. And understanding this and understanding the role and application of new developments are at least as important as knowledge that such techniques exist, Croom noted.

"A major role of the clinician is to decide what diagnostic tests and which techniques may be of benefit to his patient in providing prompt and appropriate treatment for his disease. If a given diagnostic test simply provides another piece of information without influencing decisions for treatment, the appropriateness and justification of the test should be questioned. Virtually everything we do for patients has a cost—in risk, time and money. Updating our clinical perspectives, judgments and decision making skills must keep pace with technical advances, and we must strive for a proper definition and understanding of the role of new procedures in the care of our patients." □

Calendar

Medical Alumni Activities

March		
27	Medical Parents Day	Chapel Hill
April		
2-3	Medical Alumni Annual Meeting	Chapel Hill
May		
7	N.C. Medical Society Annual Meeting Alumni Social Hour	Pinehurst

Continuing Education

January-February		
Six weeks	First District Medical Society Postgraduate Course	TBA
February		
12-13	Carolina Ocutome Workshop	Berryhill Hall
12-13	Modern Management of Infertility	Hotel Europa, Chapel Hill
March		
10-13	Internal Medicine 1982	Berryhill Hall
19-20	Ophthalmic Pathology	Berryhill Hall
April		
5-6	Cancer Research Symposium	Chapel Hill
5-7	Cardiovascular Disease Update	Pinehurst
16-18	Radiology Symposium	Hilton Head Island, S.C.
23-24	Intraocular Lens Implantation Workshop	Berryhill Hall
May		
21-24	The Preschool Special Child	Chapel Hill
29-30	Obstetrics and Gynecology Update	Holiday Inn, Wrightsville Beach

For more information about C.M.E. courses, contact the Office of Continuing Medical Education, 231 MacNider 202H, Chapel Hill, N.C. 27514; (919) 962-2118.

Medical Alumni Bulletin
231 MacNider Hall 202A
Chapel Hill, N.C. 27514

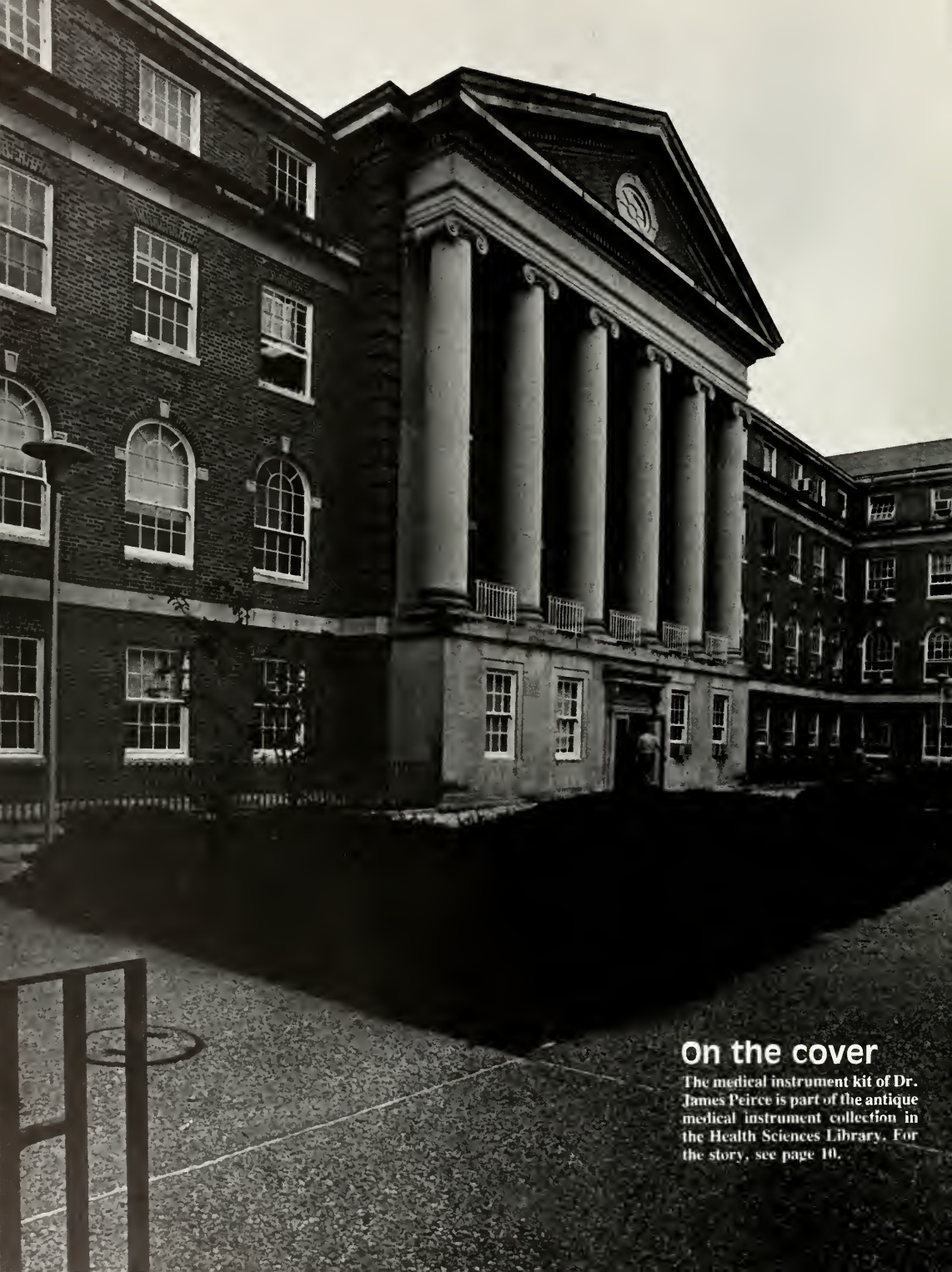
Nonprofit Organization
U.S. Postage
PAID
Chapel Hill, N.C.
Permit No. 24

HLTH SCI LIBRARY
REFERENCE LIBRARIAN
HEALTH SCIENCES LIBRARY 223H
CHAPEL HILL NC 27514

Medical Alumni Bulletin

VOLUME 28 SPRING 1982 SCHOOL OF MEDICINE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL

Yesterday's tools



On the cover

The medical instrument kit of Dr. James Peirce is part of the antique medical instrument collection in the Health Sciences Library. For the story, see page 10.

Medical Alumni Bulletin

ADVISORY BOARD
Gerald W. Fernald, M.D., '60
Terry L. Fry, M.D., '73
Thomas R. Griggs, M.D., '69
Charles Harshaw Jr., M.D., '71
A. Myron Johnson, M.D.
George Johnson Jr., M.D. '50
Noel B. McDevitt, M.D., '64
Mary Margaret McLeod, M.D., '32
Paul L. Munson, Ph.D.
William S. Pollitzer, Ph.D.
William B. Wood, M.D., '56
Chairman
William B. Blythe, M.D., '51
ex officio
Marvin M. McCall, M.D., '56
ex officio
John W. Stokes
ex officio
Shahane R. Taylor Jr., M.D., '59
ex officio

EDITOR
John W. Becton, M. Div.

CONTRIBUTING EDITORS
Kathy Bartlett
Dick Broom
Lisa Goldfarb
Betsy Helms

DESIGN
Nancy Raasch

EXECUTIVE EDITOR
John W. Stokes,
Director, Medical Center
Public Affairs

The *Medical Alumni Bulletin* is published quarterly by the UNC-CH Medical Alumni Association, Chapel Hill, N.C. 27514. Postage is paid by the non-profit association through U.S. Postal Permit No. 24. All correspondence should be addressed to the editor at N.C. Memorial Hospital 204H, Chapel Hill, N.C. 27514.

Contents

Quiet on the set 2
Life after the (population) bomb 6
Inaugural remarks 9
New genetic engineering program at UNC-CH 12
Learning the business end 20

Behind the lines

Ultimately, of course, it's what the University of North Carolina accomplishes in medicine, science and scholarship that really affects society and humanity in lasting, positive ways.

Yet for most of us connected with the UNC, as faculty, staff members or (especially) as alumni, the long-awaited national basketball championship is mighty special. While further enhancing Carolina's image nationally, it strengthens our pride of association with this great university.

As you probably know, this year's NCAA tournament participation was the Tar Heel's 16th consecutive post-season appearance, going back to when Rusty Clark (M.D. '73) and company began their varsity careers (as classmates of your editor).

Significantly, the success of Dean Smith players on the court — about one-third go on to play professionally — consistently is matched by their performance in the classroom — 94 percent have graduated.

Further, of the lettermen who have graduated, nearly one-half have gone on to graduate or professional school, including medical alumni Clark, Jim Smithwick (M.D. '70), former team manager Randy Forehand (M.D. '74), John O'Donnell (M.D. '80) and Eric Kenny (M.D. '85).

How 'bout those healers!

The editors of most publications are in the position of needing to be responsive to their readers and responsible to the owners of the publication.

In the case of a publication such as the Medical Alumni Bulletin, the two groups are one and the same. Except for a small courtesy list, everyone who receives the Bulletin is a member of the Medical Alumni Association, which publishes the Bulletin (and the Medical Alumni Times). The Medical Alumni Association, funded exclusively by your gifts to the Loyalty Fund, pays publication costs and postage.

Later this year, we're going to ask a representative group of you what you think of your publication—as readers and as owners. We'll conduct a scientific readership poll, and we sincerely hope those selected to participate will answer quite candidly.

You'll be hearing more about the Bulletin readership poll in the next few months. In the meantime, your representatives on the advisory board (listed top left, this page), as well as the editors welcome your comments, criticisms and suggestions.

From time to time, an owner/reader also serves as a writer for the Bulletin. Dr. David Grimes, '73, assumes that role in this issue. He has written an interesting article describing two trips he made to Bangladesh to investigate deaths related to sterilization procedures.

Also, your new medical alumni president, Dr. Marvin McCall, '56, has written a column outlining his present professional relationship with his alma mater.

Genetic engineering is a big item these days, both in the news and in scientific literature. We're pleased to report in these pages on a new genetic engineering program at UNC-CH. The director, whom many of you know by reputation if not personally, is Dr. Marshall H. Edgell.

The subject of an alumni profile feature is Dr. Don Fidler, '75. A psychiatrist, he also has theatrical skills and spends some of his time making movies so that learning and teaching can be fun. You can visit behind the scenes beginning on the next page.

—JWB

Touch of Hollywood on the Hil

has educational purpose

At left, in a scene from a recent trigger tape, Dr. Trent Westbrook, portrayed by professional actor Carl Blyth Jr., struggles with Jay Simmons, played by local actor Trey Porto. Westbrook is desparately trying to learn to differentiate between his personal feelings for Jay and his professional relationship as Jay's doctor. Blyth is a member of The Actor's Group of Washington, D.C. Filming the action (above) is Stan Alexander of the Medical Sciences Teaching Labs and co-director of the trigger tape "Moonstones."

"Lights... camera... (quiet on the set)... action!" Not ordinary phrases uttered regularly by physicians, but Dr. Donald C. Fidler, '75, is not an ordinary physician.

According to Fidler, "Teaching should be fun. My favorite teachers were fun, and I continue to learn from people who enjoy discovery."

This is the philosophy behind Fidler's "trigger tapes," videocassette tapes he creates to trigger learning.

"They allow instructors to provide students with valuable affective experiences, such as closely observing the inner world of a violent, paranoid personality or sitting in on an interview for (psychiatric) committment evaluation," Fidler said.

The overall objective of the tapes is to promote an exchange of ideas among the viewers, students of the health professions. "As they practice techniques such as history taking or IV inserting," said Fidler, "they (medical students) must also strive to listen, interview and emphasize—while retaining their professional objectivity."

An assistant professor of psychiatry in the School of Medicine, Fidler spends two days out of each hectic work week making six or seven of the closed-circuit television shows a year.

Behind the scenes the action is as fascinating as what goes on in front of the camera. Sixteen writers consistently churn out scripts while the Medical Sciences Teaching Laboratories in the School of Medicine provide the necessary technical asistance: camera crews, lighting and musicians.

Actors and actresses not only are drawn from the UNC-CH drama department and the Actors Cooperative at the Art School in Carrboro, but also include professionals brought in on location.

Behind the scenes, it's a lot like a small movie studio when one of Fidler's trigger tapes is in production. Technicians set up the lights and cameras, while actors are being made up. Fidler, shown here (right) supervising the make-up session for one of his young actors, has experience in acting, directing, writing and lighting. Also shown are Patsy Authier, a local beautician, trimming Trey Porto's hair, and Coro Malaxecheverria, continuity director. (Photos by Steve Fisher and Associates)

Subject matter of the films range from reactions to violence and dealing with depression to psychotherapy and doctor-patient relationships, Fidler said. The interaction to families in these situations is of specific concern.

The tapes are usually an assimilation of events, but recording of actual events is not uncommon. Fidler's latest project is the completion of a documentary on faith-healing in Charlotte.

After receiving his M.D. from UNC-CH in 1975, Fidler was heading west to do his residency when the university created a position that allowed him to combine his medical and theatric talent.

His acting career began at 10 with the outdoor drama, "Horn in the West." From there he went on to summer stock and some television. Although he never considered acting over medicine, he continued studying acting, directing, writing and even theatrical lighting throughout his years as a UNC-CH undergraduate and medical student.

His film, "The Minotaur," based on violence and psychosis, won an award from the Health Educational Media Association. Fidler, portraying a psychotic, was cast in the starring role.

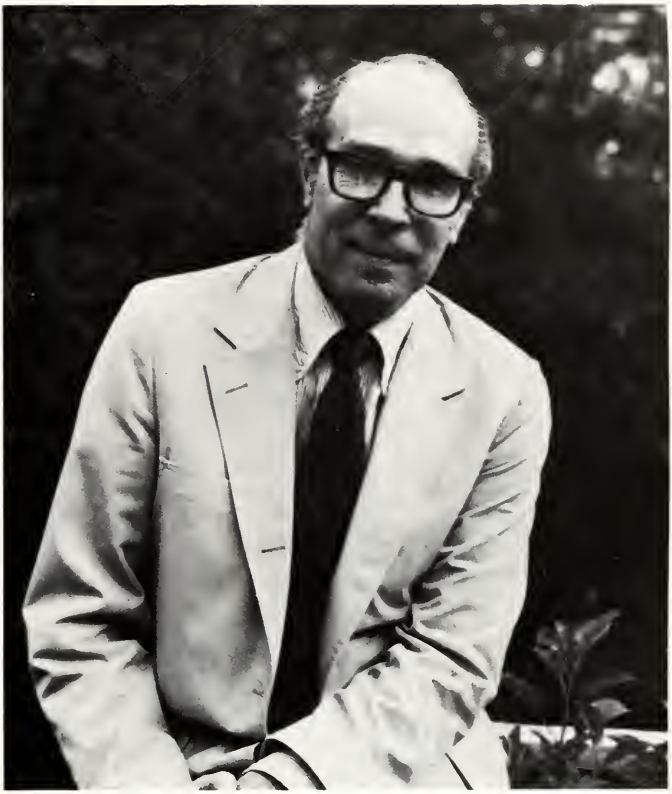
Fidler has participated in productions associated with the Carolina Playmakers, The Actor's Cooperative of The Art School in Carrboro and the UNC-CH drama department. On occasion, he even finds time to do lighting for the Chapel Hill Ballet Company.

Still, his primary time commitment is, of course, to his profession. Fidler is well respected by his colleagues.

He is a member of the Association of Academic Psychiatry and representative to the southeast district for the Association of American Psychiatry and The American Psychiatry Association Committee on medical student affairs.

And Fidler enjoys teaching. After all, "teaching should be fun." □

Dean's Page



Many phenomena make the practice and teaching of medicine a never ending source of wonderment. I find the insights into the human condition—I would even say the simple nobility of so many of our people, physicians and patients both—to be a matchless source of continuing education and professional growth. And it is also a source of excitement to me to observe from close range and early involvement the great scientific advances of our times—and indeed of all times.

Most physicians now practicing have watched and used scientific advances of power and diversity unparalleled in other times or places. The list is familiar: antibiotics, immunizations, hormones, powerful technologies and great physical resources. There have been effects on morbidity and mortality which are impressive, even dramatic, though so easily forgotten. How often do we recall the asylums and sanataria, the polio epidemics, or the maternal and fetal death rates which were three and four times the current rates only a few decades ago?

A little like the premonitory rumbling of a volcano, the great scientific advances of the past were clearly foretold years in advance by the burgeoning science base. And now there is a similar burgeoning of a science base as another great and powerful scientific advance pregnant with potential application in the practice of medicine comes into focus. The growing understanding of the biochemistry of genetics, developed over the past 40 years, is leading to improved techniques for genetic engineering. This work, involving controlled modification of metabolism and metabolic products of living matter, will likely find useful application in both diagnoses and therapy in every specialty, as well as in many fields of industry and agriculture.

More than a decade ago, Dr. Philip Manire, then chairman of the department of bacteriology, now vice chancellor and dean of the Graduate School, and his colleagues correctly anticipated the importance of genetic engineering in biology and medicine. They began to develop faculty with special competence in reseach and teaching programs in this field. More recently the School of Medicine has established a formal program in genetic engineering called the Program in Molecular Biology and Biotechnology. It is headed by Dr. Marshall Edgell, professor of bacteriology and immunology. Dr. Edgell, through his own research, is one of the important true pioneers in genetic engineering.

There are three important reasons for the University to promote research and education in the field of genetic engineering:

- In order for us to stay current and be a leader in biomedical research, we must understand and be able to utilize this technology, because so much of research and medical practice in the future will be based on genetic engineering.
- Many health care providers will have to master various aspects of this technology in order to stay current in their own professions. It is the University's responsibility to teach them.
- And further development and application of this technology will require a whole new group of scientists, technicians and managers of industrial activities. Our role is to educate them, as well.

This issue of the Bulletin contains a commentary on recombinant DNA science and the Program in Molecular Biology and Biotechnology. I know that Dr. Edgell would welcome expressions of ideas and opportunities from alumni as we work to develop this important field and to incorporate it appropriately into the other enterprises of the School of Medicine.

Stuart Bondurant

Grimes, '73, reports on fall-out from the population bomb

By David A. Grimes, M.D. '73

To some, the word "Bangladesh" evokes vague recollections of a war of independence a decade ago or a benefit rock concert. To those interested in population and family planning, Bangladesh is a vivid demonstration of the consequences of unbridled human fertility.

In this Asian nation, where more than 90 million people live in an area the size of Georgia, there is little talk about the "population bomb." It is widely acknowledged that the "bomb" has already exploded; containing the "fall-out" is now the nation's top priority.

For individuals working in the family planning field, a trip to Bangladesh can be likened to a Moslem's pilgrimage to Mecca: every true believer should do it once in his lifetime. My first turn came in the summer of 1980.

Our reproductive epidemiology group at the Centers for Disease Control in Atlanta was asked to assist the government of Bangladesh and the United States Agency for International Development (USAID) in investigating reported clusters of deaths related to surgical sterilization, an important component of the family planning program in Bangladesh. Because of our training in both obstetrics/gynecology and epidemiology, Dr. Bert Peterson, (formerly with CDC and currently a resident in the department of obstetrics and gynecology at North Carolina Memorial Hospital) and I were asked to perform the field investigations.

Fortified with gamma globulin and chloroquine, and burdened down with canteens and knapsacks, we set off across the Atlantic Ocean to Bangladesh with brief stops in Frankfurt, Bombay and Bangkok. Residency training in obstetrics had prepared us well for the rigors of international air travel; we heeded no internal clock and slept at will—and in any position.

Formerly known as East Pakistan, Bangladesh is one of the world's poorest and most densely populated nations. In the remotest regions of the country, we were rarely out of sight of other humans. This crowding is compounded by the fact that one-seventh of the surface area of Bangladesh is covered by water even before monsoon season.

Bangladesh is not only a land of people but also of water. The geography is that of an alluvial plain formed by several of Asia's mightiest rivers, including the Ganges and Brahmaputra. Transportation by land is often difficult and undependable, so the 5,000 miles of navigable waterways in Bangladesh are the primary means of travel for Bangladeshis.

After briefings in Dacca, the capital city, we embarked in four-wheel drive vehicles to perform on-site investigations of reported sterilization-attributable deaths and to search for unreported deaths. During our week in Dacca and two weeks in the countryside, the hospitality of our Bangladeshi colleagues helped offset the heat, bone-jarring roads and turista we both encountered. We learned that raw coconut milk is a cheap, safe and widely available oral rehydration fluid (although, as anticipated, Coca Cola was ubiquitous).

We investigated 28 deaths (21 from tubectomy and 7 from vasectomy) in two of the four geographic divisions of Bangladesh. The overall death-to-case rate was about 20 deaths per 100,000 operations. In contrast, the maternal mortality rate is about 570 deaths per 100,000 live births. Scrotal infection accounted for all vasectomy deaths; we discovered that surgeons in Bangladesh commonly did not wear sterile gloves to perform vasectomies. Anesthesia overdosage, tetanus and intraperitoneal hemorrhage were the leading causes of death from tubectomy. The investigation is summarized in a manuscript currently in press at the International Journal of Gynaecology and Obstetrics.

After discussing our findings and recommendations with Bangladeshi and USAID officials, we returned home in opposite directions. I flew westward with the sun, while Bert circled the globe eastward with visits in Bangkok, Hong Kong and Honolulu.

Between the two of us, we had lost

Dr. David A. Grimes is chief of the Pregnancy Epidemiology Branch at the Centers for Disease Control and has faculty appointments in the Emory University School of Medicine departments of gynecology and obstetrics and community health. He came to the UNC-CH School of Medicine from Greensboro by way of Harvard, earning a Morehead Fellowship and serving as president of the graduating class of 1973.

This 19-year-old woman in Bangladesh has had four babies. She underwent sterilization on the day before this photograph was taken. All women who accept tubal sterilization are given a new sari, such as the young woman is wearing. Dr. David A. Grimes has made two trips to Bangladesh to investigate deaths related to surgical sterilization.

A sterilization procedure in progress in Bangladesh. The attendants at the patient's head are restraining her hands because patients frequently emerge from the light anesthesia during the operation. Note that the attendants are not wearing gloves. Grimes also observed surgeons and their assistants operating with bare hands.

19 pounds during our 3 weeks in Bangladesh. Once home, I promptly (over) corrected this deficit with large, frequent servings of Breyer's chocolate mint chip ice cream, a craving for which I developed during my previous rice and curry diet (eaten without utensils as is Bangladeshi custom).

In response to our investigation, the Government of Bangladesh and USAID invited Dr. John Fishburne (formerly a member of the faculty in the departments of obstetrics and gynecology and anesthesiology at UNC-CH), to Bangladesh. There he investigated the anesthesia-related deaths in more detail and provided training in anesthesiology for the Bangladeshi physicians.

In May 1981, I was awakened in the early morning hours while at a meeting in Las Vegas and advised to pack another knapsack. I was again Bangladesh-bound, this time alone. After a brief layover in New Delhi, I arrived in Dacca to join another investigation of sterilization deaths.

During this trip I journeyed down the Ganges on an old British side-wheel steamer into southern Bangladesh, domain of the fabled Royal Bengal Tiger. The Ganges voyage provided a unique view of Asian village life that has changed little in several thousand years—tiny sailboats heaped with bananas and mangos, ox-drawn plows tilling the rice paddies, and fishermen casting their nets along the banks. Being the only Westerner on the ship, I felt like a character from a Joseph Conrad novel.

The second investigation corroborated the findings of the first: surgical sterilization is a safe procedure in Bangladesh. No vasectomy deaths were identified during the study interval. In addition, the death-to-case rate for tubectomy was lower than that in the previous investigation. Findings and recommendations stemming from these two investigations were incorporated into a training conference for Bangladeshi physicians held in Dacca during May 1981. Continued surveillance of sterilization-attributable deaths and ongoing postgraduate courses for physicians are planned; these should help make sterilization an even safer means of fertility control in Bangladesh in the years ahead. □

A letter from the president

(Dr. Marvin M. McCall III, '56, was installed as president of the Medical Alumni Association during Medical Alumni Weekend. The Bulletin asked him to write an inaugural column on his perceptions of the medical center in Chapel Hill.)

Dear fellow alumni:

As director of the Internal Medicine Residency Program at Charlotte Memorial Hospital and Medical Center, my relationship with this medical school is significantly different from that of a physician in private practice. Our alliance took root in the early 1960s, budded in 1967 when we formed an agreement with Dr. Berryhill and the division of community medicine, and blossomed in 1972 with the development of the AHEC programs.

To be sure, we have used the UNC-CH medical center as a referral hospital and its faculty as consultants in all areas of medicine, but most important to me is our continuing interaction with medical students and visiting faculty. In the academic year 1980-81 there were 64 such students who had one-month training rotations in the department of medicine at Charlotte; and each month a member of the Chapel Hill faculty delivered a lecture and participated in teaching rounds. Meeting as many of the faculty as possible over the years has afforded us first-hand information about research activities of the various divisions in the department.

Those of us who entered the medical school as members of a small class, knowing most of the faculty, should feel fortunate for we enjoyed a comaraderie that is no longer possible. With larger classes and widely scattered faculty, the medical student of today is faced with problems we never had. The body of knowledge is larger, and technology is more diverse, complex and expensive. Subspecialization has resulted in the production of physicians who "know more and more about less and less," so that a student may be embarassed not to know the ultrastructure of T-lymphochtes. Unfortunately, students of today must make career choices very early so that they can cram as many related electives as possible into their fourth year.

Despite these problems, the UNC-CH medical student manages to cope and excel. It is gratifying to see the changes that occur in the third-year clerks as they go through their clinical rotations, and even more satisfying to have them return as acting interns in the fourth year. Previously learned bits and pieces of knowledge, seemingly unrelated, are being formed into working hypotheses; the student is now able to synthesize a plan of diagnosis and treatment from the history, physical examination, and laboratory studies; self-confidence is developing—a beautiful metamorphosis.

Each year I interview intern applicants from 40 medical schools. UNC-CH students are competitive with any of them and as house officers have consistently demonstrated an excellent fund of knowledge, the capacity for hard work, compassion for people, and a desire to excel but not at the expense of their peers. It is exciting to be a part of it all—

I am proud to be an alumnus.

— Marvin M. McCall, M.D. '56
President
Medical Alumni Association

We've come a long way since these were used

There's a guillotine in the Health Sciences Library in Chapel Hill but it's not used to punish students with overdue books. It's a tonsillectomy guillotine which is part of the library's collection of antique medical instruments.

Items from the collection, which was unpacked, organized and photographed last spring, are on display in the library and have generated a great deal of interest, according to Nancy Bruce, rare books librarian.

"We have had these items for several years," Bruce said, "but until we did some housekeeping in connection with our construction and renovation, they had been stashed away in a closet."

Last April, Bruce called on Dr. Peter Curtis, associate professor of family medicine, and Michael McVaugh, professor of history, for help with the instruments which had been donated and collected throughout the years. They spent an entire day unpacking instruments while Jay Clary, media technician in the department of family medicine, photographed the contents of each box.

Among the items discovered were scarificators used for bloodletting, a purple glass lens to focus sunlight for treating warts, a primitive polygraph, a pewter enema and dental keys for extracting molars. There were also two saddlebag medicine kits, a home delivery kit, plantation and ship medicine kits, amputation kits and a direct blood transfusion kit.

Several groups of the instruments,

A

D

Photo A: This opthalmologist's kit with gold-trimmed lenses may be the most valuable item in the Health Sciences Library's antique medical instrument collection.

Photo B: This amputation set dates back to about 1900 and is among the most modern items in the collection.

Photo C: A phonendoscope from 1894.

Photo D: A magneto-electric machine "for nervous diseases."

C

including a World War I medic's belt, belonged to the late Dr. James B. Bullitt, chairman of the department of pathology and bacteriology from 1913 to 1946.

"He appears to have been a remarkably well-equipped physician," Bruce said, adding that Bullitt's materials include three boxes of slides and a complete ophthalmologist's lens kit.

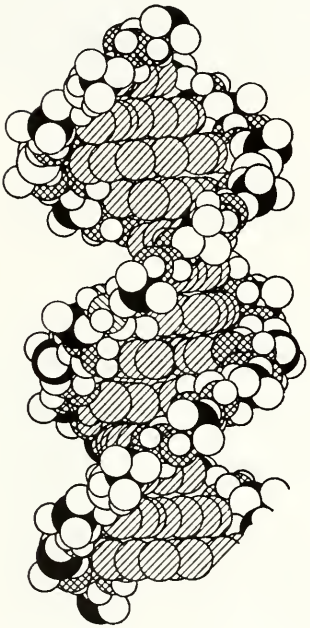
Many of the instruments were collected by the late Dr. W. Reece Berryhill, dean of the medical school from 1941 to 1964. "He apparently accepted some donations from the U.S. Surgeon General's Office," Bruce said, "but the catalog of his collection was lost years ago.

"We do not even know the history of ownership of a large ophthalmologist's lens kit with gold rimmed lenses," she continued. "It's probably the most valuable item in the collection."

The library plans to keep a representative group of instruments for display purposes and for students to research and identify. The library has a variety of old catalogs and recent histories which are useful in identifying the instruments.

"We don't plan to become a museum," Bruce said, "but we do want to make the instruments we have available for classroom use. Students of both medicine and history are aghast when they see these things and read the theory behind their use. They can't imagine that some of them were ever used." □

New genetic engineering prog



Hydrogen

Oxygen

Carbon in phosphate-ester chain

Carbon and nitrogen in bases

Phosphorus

Calling genetic engineering a technology with the power to influence "many of the factors that determine the health of mankind," the dean of the School of Medicine has announced a new program to promote and coordinate genetic engineering research and education on the campus.

Dr. Stuart Bondurant said the Program in Molecular Biology and Biotechnology should amplify the efforts of scientists in various University departments to extend the uses of genetic technology.

Genetic engineering involves isolating DNA, severing the DNA at specific sites and then rearranging the pieces to alter their genetic instructions. Because the process "recombines" genetic material from several sources, it sometimes is called recombinant-DNA technology.

Director of the Molecular Biology and Biotechnology program is Dr. Marshall H. Edgell, professor of bacteriology and immunology, whom Bondurant called "one of the early gene splicers and the source of important, pioneering work in this field." He has been a member of the genetics curriculum since joining the faculty in 1968.

According to Edgell, the long-term pay-off of genetic engineering, as far as human health is concerned, will be a thorough understanding of how the human body works.

"Within the next few years, we can expect to learn in detail how isolated mammalian cells function," he said. "From that base, we will come to understand cell-cell interactions, then organ systems and finally the organism itself."

Edgell said this knowledge may help scientists to solve the riddles of many serious, chronic health problems.

"I anticipate that the knowledge we can expect to gain, in part as a consequence of genetic technology, will create for all of us the possibility of inhabiting a body that functions at full capacity for a longer time. It's not going to happen tomorrow, but it might happen 30 years from now."

He said the short-term yields of genetic engineering include inexpensive pharmaceuticals, such as insulin, interferon, growth hormone and vaccines.

An important function of the genetic engineering program is to forge a closer bond between two groups of research scientists.

"We need to increase communication between the genetic engineers and the people with special knowledge of biological systems in which there are opportunities for practical applications of genetic engineering," Edgell explained.

He said an academic program is being designed to promote cooperation and a sharing of knowledge between these two groups. In addition, the program plans to sponsor a series of summer meetings for basic scientists, called the Carolina Conferences, which will explore scientific topics in which genetic engineering has a prominent role.

Laboratory workshops, to be called the Carolina Workshops, will encourage the spread of genetic engineering skills among scientists both locally and nationally.

Edgell said the academic facets of the program will help attract additional high-calibre researchers and funding from both government and industry. He noted that, with the federal government cutting back its funding for scientific research, support from the private sector will become increasingly important.

ram established at UNC-CH

"While we may have here a very strong base of scientists already skilled in molecular genetics, we will need to continue to grow if we want to attract outside support and build a strong, mutually beneficial relationship with industry," he said. "I think the program we are setting up can contribute to a strong, nationally competitive scientific environment that will allow us to attract more internationally visible research scientists into our community."

Dean Bondurant said the medical school's strength in the area of genetic engineering can be traced to Dr. G. Philip Manire, former chairman of bacteriology and immunology and now UNC-CH vice chancellor and dean of the graduate school.

"Dr. Manire had the foresight more than a decade ago to know where science was headed and to start us in this direction. He recognized the power of genetic engineering and recruited scientists who have become leaders in the field."

Because of the work that these and other scientists have done, Bondurant said, "the technology is now ripe for application in a number of ways." He said the medical school will work closely with the state's biotechnology program which is being established, in part, to promote recruitment of industries that utilize genetic engineering technology.

"We applaud Governor Hunt's interest in this field and efforts to develop it for the industries and people of North Carolina," Bondurant said. "We look forward to working with the governor and various state agencies and with our colleagues on other campuses to advance the biomedical, industrial and agricultural applications of genetic engineering." □

Dr. Marshall H. Edgell

Extracts

Physicians in the School of Medicine have begun clinical trials of a drug that may be the most effective treatment yet for sickle cell disease, the hereditary and sometimes excruciating illness that is most common among black people.

The UNC-CH scientists are joining with researchers in California, New York and Mobile, Ala., to evaluate cetiedil, a compound first synthesized in France 20 years ago.

Dr. Eugene P. Orringer, associate professor of medicine, is principal investigator for the project.

Cetiedil, Orringer explained, was developed originally as a smooth muscle relaxant to improve circulation to the legs of patients with hardening of the arteries. Because of its success and its additional properties as a local anesthetic, French physicians speculated that it also might help to curb the intense bouts of pain that sickle cell victims experience periodically.

"Although no controlled studies were carried out, initial reports that came primarily from West Africa claimed that the drug was extremely effective," he said.

By May, Orringer, Dr. Lee R. Berkowitz, a fellow in hematology, and Sue Sparrow, coordinator of the UNC Sickle Cell Program, hope to recruit 25 patients who are age 19 or older.

Orringer said cetiedil appears to have two major advantages over urea and cyanate, two anti-sickling agents once touted as promising treatments for the condition.

"First, cetiedil seems to be active at much lower concentrations, and second, no major toxic side effects have been recognized to date," the physician said.

Berkowitz and Orringer published results of their own laboratory studies of the drug in the November issue of The Journal of Clinical Investigation. They concluded that cetiedil exerts its anti-sickling effects by preventing water loss from red blood cells.

Helping doctors and dentists around the state relieve the suffering of their patients with chronic pain is the aim of a new program based in the schools of medicine and dentistry and North Carolina Memorial Hospital.

The UNC Pain Program brings together health care specialists in a number of disciplines to evaluate difficult pain problems and recommend ways to treat them.

"We don't have all the answers and can't solve everyone's pain problem," said Dr. Donald C. Whitenack, medical director of the program. "But what we can offer is an organized approach that gives special attention to all aspects of what often is a very complicated problem."

The pain program is primarily a consultation service and does not assume responsibility for the continuing care of patients.

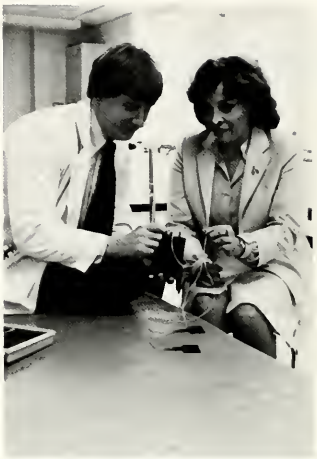
"Part of our job as a state institution is to find ways to support our colleagues in practice across the state, not to take over the care of their patients," Whitenack said.

Dr. John J. Lemasters, an associate professor of anatomy at the University of North Carolina at Chapel Hill, has received an established investigatorship award of the American Heart Association.

Lemasters' primary field of study is bioenergetics, which deals with the transformation of energy within living organisms. Not only has his research increased the scientific understanding of cell and molecular biology, but also laboratory techniques he has developed have been adopted by other medical scientists.

A 1969 graduate of Yale University, Lemasters earned M.D. and Ph.D. degrees from Johns Hopkins University in 1975. He was appointed to the UNC-CH School of Medicine faculty in 1977 as an assistant professor. Lemasters, who also serves as director of graduate studies in the department of anatomy, was promoted to associate professor this year.

The American Heart Association established investigatorship is a five-year award, covering the period July 1, 1982-June 30, 1987.



Mike Thomas explains the function of a neuromuscular stimulator to Dr. Alicia Castaneda, director of rehabilitation training for the Mexican government.

Rehabilitation specialists at the medical center in Chapel Hill and their counterparts in Mexico will visit each other and share information under a cooperative program being established by the University of North Carolina at Chapel Hill and Mexican health officials.

The program is an outgrowth of a recent visit to the Chapel Hill by Dr. Alicia Castaneda, director of rehabilitation training for the Mexican government. She attended a seminar on "functional electrical stimulation" sponsored by the department of physical therapy at North Carolina Memorial Hospital. The seminar taught physical and occupational therapists how to use electrical stimulation to re-educate and strengthen muscles in patients who have suffered nerve damage.

Physical therapist Mike Thomas, spokesman for the seminar organizing committee, said Castaneda's visit was quite productive. "I think we have made a good impression on each other, and she has collected a lot of information to take back with her.

"I think this is the beginning of a very mutually beneficial exchange," Thomas said.

Extracts

Dr. John P. Perkins has been reappointed chairman of the department of pharmacology, UNC-CH Chancellor Christopher C. Fordham III (C.Med. '49) has announced.

Perkins, a native of Phoenix, Ariz., has been a professor and chairman of pharmacology since 1977. His five-year reappointment was effective March 5.

Before coming to the University, Perkins taught pharmacology at the University of Colorado Medical Center in Denver for nine years. From 1966-68, he was a U.S. Public Health Service postdoctoral fellow in biochemistry at the University of Washington at Seattle.

Perkins has been working in the molecular study section for the National Institutes of Health since 1979. He recently was part of a review section in physiological chemistry for the American Heart Association.

Perkins was co-founder of the Journal of Cyclic Nucleotide Research and co-editor of the publication for three years.

He received his B.S. degree in 1960 and his M.S. in 1962 from Arizona State University, and he earned his Ph.D. in pharmacology in 1966 from Yale University.

Women who have babies at North Carolina Memorial Hospital can call on the expertise of Dr. Barry Corke, a member of both the anesthesiology and obstetrics and gynecology departments.

Corke is one of approximately 200 physicians in the country who specialize in obstetrical anesthesiology and he enjoys the challenge of simultaneously looking after the needs of both mother and baby in labor.

"In spite of the emphasis on natural childbirth in the past decade," Corke said, "there is a lot of evidence which indicates that good, well-conducted pain relief can be beneficial to both mother and baby. There is no need for a woman to feel guilty if she needs pain relief. In many cases it is the best thing for both mother and child."

Corke came to Chapel Hill in August from Vanderbilt University Hospital in Nashville. He received his medical degree from the University of Sheffield School of Medicine in Sheffield, England in 1961 and has been associated with the Boston Hospital for Women, Harvard University Medical School.

"We feel very fortunate that N.C. Memorial and the UNC-CH School of Medicine can now offer specialized services in obstetrical anesthesiology," said Dr. Robert C. Cefalo, acting chairman of the department of obstetrics and gynecology at the time of Corke's appointment. "The majority of women who have babies in the United States today, do not have access to a full-time obstetrical anesthesiologist."

Cefalo commended Dr. Kenneth Sugioka, chairman of the anesthesiology department for his foresight and wisdom in hiring an obstetrical anesthesiologist.

Helping families cope with the normal changes that occur during a divorce is the focus of a study at the department of psychiatry.

"We want to educate people about what they can expect during a divorce, about the feelings they may have and how their children may feel," said Dr. Nancy Warren, assistant professor of psychology and project director.

"Divorce occurs so frequently now that by 1990, 30 to 40 percent of all children will have had some experience in a single parent home," said Dr. Robert Grew, project co-director. "Divorce isn't a single event. It's a full process of change for a family—a change that is largely predictable."

This normal, predictable process is what Warren, Grew and associates in the School of Medicine are studying. They hope to find out what type of educational support program works best while providing a needed service for single parents.

The program focuses on an "off-the-wall period of adjustment, which usually is quite lengthy, usually two or three years," Grew said.

The continuing study, now in its second year, is a cooperative effort between the UNC-CH department of psychiatry and the Orange-Person-Chatham Mental Health Center. It is being funded for three years by the National Institute of Mental Health.

Department of Medicine residents here got some good news recently from the American Board of Internal Medicine.

Not only did all 28 of the physicians who took the board's internal medicine certifying examination pass, but as a group they did better than 95 percent of all the other residents who took the exam across the United States.

Three of the UNC residents scored at the 99th percentile level, the highest score possible.

"We are extremely pleased with the results and extremely proud of the young men and women who served their residencies here over the past three years," said Dr. David A. Ontjes, professor and acting chairman of medicine.

"In the past, they have done well, with their average score being at approximately the 90th percentile, but this year has been outstanding in my opinion."

Dr. Andrew Greganti, assistant professor of medicine and director of the house staff internal medicine training program, said 7,650 physicians took the examination last fall. They came from 403 similar programs across the country.

Extracts

Dr. Philip Sloan and Dr. Nancy Morgan (center), a third-year resident in the department of family medicine, visit Ella Mae Gillie during their Friday morning trip to Lakeview Manor, a nursing home in Chapel Hill. Sloane has assumed the responsibilities of medical director at Lakeview Manor, and members of the family medicine department have become involved in patient care at the facility.

A unique arrangement has been established between Lakeview Manor, a nursing home in Chapel Hill, and the department of family medicine.

Dr. Philip Sloane, assistant professor of family medicine, has assumed the responsibilities of medical director for Lakeview Manor, an intermediate care nursing home, and will oversee the care for all of the facility's patients. In addition, individual faculty members and residents from the department of family medicine will serve as personal physicians for new nursing home patients.

The arrangement should have benefits for both Lakeview Manor and the department of family medicine, Sloane said. He explained that faculty and residents from the family medicine department will visit Lakeview Manor every Friday morning to check on patients; a member of the department of family medicine will be on call 24 hours a day.

If a resident of Lakeview Manor requires hospitalization at North Carolina Memorial, he or she can be cared for by the same physician who was responsible for the patient's care at Lakeview.

Scientists at UNC-CH have found new evidence that oral contraceptives that contain progestin hormones in addition to estrogen can help protect women from cancer of the uterus lining.

Their study, published in a recent issue of the Journal of the American Medical Association, shows that women who don't use combination product oral contraceptives have at least twice the risk of developing endometrial cancer as those who do.

The protective effect of the contraceptives increases the longer they are used and decreases over time once they have been discontinued, according to the report.

Authors of the study are Drs. Barbara S. Hulka, Lloyd E. Chambless and Bernard G. Greenberg of the School of Public Health and Drs. David G. Kaufman and Wesley C. Fowler (M.D. '66) of the School of Medicine.

Hulka, professor of epidiology and head of the Cancer Research Center's epidemiology program, said the results support the belief of some scientists that progestin hormones should be a part of any estrogen replacement therapy during or following menopause.

The UNC-Chapel Hill research was supported in part by a grant from Ayerst Laboratories. □

Class Notes

40s

Ira A. Abrahamson Jr., C. Med. '46, had an article published in the American Academy of Family Physicians, Oct. 1981, Vol. 24, No. 4, titled "Cataract Update."

Leon T. Zientek, C. Med. '47, practices otolarvngology in the Family Medical Center in Reading, Pa.

50s

Charles B. Fulghum, M.D. '54, has been elected to the board of directors of Peachtree Parkwood hospitals, where he also serves as chairman of the adult department of psychiatry.

C. Knox Massey, D.S.A. '57, was one of five alumni of the University of North Carolina at Chapel Hill honored with Distinguished Alumnus Awards during last fall's University Day ceremony. An advertising executive in Durham for 43 years, Massey served without fee in promoting the statewide Good Health Campaign that brought about the four-year medical school and teaching hospital at UNC-CH.

M. Paul Clapp, M.D. '58, is a member of the department of radiology faculty of the University of Arizona College of Medicine in Tuscon.

John B. Gentry, M.D. '59, is director of laboratories at Cleveland Memorial Hospital in Shelby.

Martha K. Sharpless, M.D. '59, was a featured speaker at recent workshop on child abuse held in Reidsville. The workshop was sponsored by the Greensboro AHEC and was designed to update skills of those who provide services to abused children and their families. Sharpless is an associate professor of pediatrics at UNC-CH and chief of the pediatric division of Moses H. Cone Memorial Hospital in Greensboro.

60s

John R. Curtis, M.D. '60, is a psychiatrist with the University Health Service of the University of Georgia at Athens.

Cosmo A. Difazio, M.D. '61, is a member of the faculty of the anesthesiology department at the University of Virginia Hospital in Charlottesville.

William B. Brown, M.D. '61, and **R. Frank Lowry Jr., M.D. '68,** have been elected to serve on the newly formed board of directors for the First Citizens Bank in Roanoke Rapids. Brown is president of Halifax Internal Medicine Associates, P.A. Lowry is an ophthalmologist in private practice in Roanoke Rapids.

Mario Stone, HS '62, has been chosen secretary-elect of the American Academy of Neurological and Orthopaedic Surgeons.

William N. Hubbard Jr., DSA '62, has been appointed to the Board of Directors of the International Fertility Research Program. He is president of the Upjohn Company.

R. Daley Goff Jr., M.D. '63, has been elected to Fellowship in The American College of Cardiology. This category of membership is limited to physicians with specialty certification and advance training. He is currently practicing thoracic and cardiovascular surgery in St. Petersburg, Va.

Robert B. Shearin, M.D. '68, is a member of the department of pediatrics faculty at Georgetown University Hospital in Washington, D.C.

Donald C. Chaplin, M.D. '69, continues his practice as a cardiovascular disease specialist in the Kernodle Clinic in Burlington.

Thomas R. Griggs, M.D. '69, is director of North Carolina Memorial Hospital's emergency medical technician training program which recently formalized its long-standing relationship with Orange County's emergency services. The hospital, Griggs said, has signed an agreement with the county commissioners to provide free training and medical supervision for both the Orange County and South Orange rescue squads.

Scientists find important clue to CF mystery

Michael R. Knowles, M.D. '71, is one of three scientists at UNC-CH who have discovered what they believe is an important clue to the mystery of why mucus clogs the lungs of cystic fibrosis victims. The other investigators are Drs. John T. Gatzy Jr., associate professor of pharmacology, and Richard C. Boucher Jr., associate professor of medicine. Knowles is assistant professor of medicine.

The scientists, who published a report on their research in the Nov. 17 issue of the New England Journal of Medicine, have found that the natural electrical activity of the airways is more than twice as high in patients with the disease than in healthy persons.

They have also found a drug that reduces the electrical activity to normal levels, at least temporarily.

In experiments with 24 cystic fibrosis patients, the UNC-CH scientists measured an average of 60 millivolts. Some 150 control subjects, including healthy individuals, parents of CF children and victims of other lung diseases, all averaged only about 25 millivolts.

"The obvious question then was how does this electrical activity relate to the disease process, and that's where the drug Amiloride came in," Knowles said. "Amiloride is a diuretic that is very specific in its action. It only blocks sodium absorption."

Using the drug in further experiments, the team was able to reduce the electrical activity in the airways of CF patients to normal ranges for brief periods. That finding led them to conclude that excessive sodium absorption is responsible for the differences they were recording.

Whether Amiloride or related compounds can be used as a treatment for cystic fibrosis is entirely unknown at this point and remains to be tested, Knowles said. The UNC team is currently designing hospital-based studies of oral Amiloride for adult CF patients.

Administration of the drug in aerosol form is another possibility they are considering if it passes animal tests.

One of the key findings has been that electrical activity in nasal passages is comparable to levels measured in the lungs, both in patients and healthy persons. Taking advantage of that discovery, the physicians developed a technique for nasal measurements that is more convenient for them and far more pleasant for patients than direct studies in the lungs.

The technique may one day supplement the current method of diagnosing cystic fibrosis, particularly in infants, Knowles said.

Boucher said Drs. **Gerald Fernald (M.D. '60)** and Gerald Strope, who direct the UNC Cystic Fibrosis Clinic, both contributed substantially to the research.

The UNC-CH studies are being supported by grants from the National Heart, Lung and Blood Institute and the American Heart Association.

Class Notes

70s

William C. Tate II, M.D. '72, has been practicing general surgery at Cannon Memorial Hospital in Banner Elk since 1977. He became a fellow of the Southeastern Surgical Congress in February '81 and a fellow of the American College of Surgeons in October '81.

Michael W. Gaynon, M.D. '72, is on the faculty of Stanford University Medical Center, in the division of ophthalmology.

William B. Guilford, M.D. '73, assistant professor of radiology at UNC-CH, was one of 31 University faculty members to receive Junior Faculty Development Awards for 1982. Other School of Medicine faculty members, all assistant professors, receiving Junior Faculty Development Awards this year were Drs. Phillip J. Bassford Jr., bacteriology and immunology; Robert A. Eisenberg, medicine; Stephen A. Grubb, radiology; James F. Howard Jr., neurology and medicine; Kathleen K. Sulik, anatomy; and Thomas W. Traut, biochemistry and nutrition.

Marshall M. Feaster III, M.D. '74, is a chief resident in thoracic surgery this year at North Carolina Memorial Hospital.

Blair A. Keagy, HS '74, has been appointed an assistant professor of surgery UNC-CH. Previously he was an associate in cardiovascular and thoracic surgery at Geisinger Medical Center in Danville, Pa.

Patricia A. Aronin, M.D. '75, is serving as a chief resident in neurosurgery this year at North Carolina Memorial Hospital.

Linn Haynes Hatley, M.D. '76, was elected junior fellow chairman of District IV (Caribbean Islands, District of Columbia, Florida, Georgia, Maryland, North Carolina, Puerto Rico, South Carolina, Virgin Islands, Virginia, West Indies, and West Virginia) of the American College of Obstetricians and Gynecologists for a one-year term beginning fall 1981.

Thomas Speros, M.D. '76, has announced the opening of his practice of family medicine under the name of the Washington Family Medicine Center in Washington, N.C. He previously served as an assistant professor with the department of family practice at East Carolina University.

Ronald W. Gerbe, M.D. '76, has opened a practice in otolaryngology and head and neck surgery in Chapel Hill.

Duncan Postma, M.D. '77, is serving this year as otolaryngology chief resident at North Carolina Memorial Hospital.

Meyer E. Dworsky, M.D. '77, has been awarded a research fellowship by the Institute for Pediatric Service of Johnson & Johnson Baby Products Co. Dworsky is completing his first year of post-doctoral fellowship in pediatric infectious disease at the University of Alabama in Birmingham.

Dr. Lonnie R. Bristow (right), president of the American Society of Internal Medicine, visited the School of Medicine recently as a guest of the department of medicine and the office of continuing medical education. Here, he talks with Drs. John Sessions (left) and William B. Wood ('56) after a lecture Bristow presented titled, "Preventive Medicine: Is It Political, Social or Clinical?"

Class Notes

Michael S. Wheeler, M.D. '77, is a chief resident this year in North Carolina Memorial Hospital's department of pathology.

Jeffrey A. Margolis, M.D. '78, became the first board certified internist practicing in Duplin County recently. A native of New Bern, Margolis now practices at Goshen Medical Center in Faison, where he lives with his wife Barbara and son Joshua. He is on the staff of the Duplin General Hospital and also serves as Duplin County medical examiner.

J. Bryon Walthall, M.D. '78, is associate director of the Pontiac General Hospital family practice residency program in Pontiac, Mich. after completing his residency in Flint and a concurrent Faculty Development Fellowship through Michigan State University in Lansing. His wife, **Nancy Teaff, M.D. '78,** is in her final year of ob-gyn residency at Wayne State University in Detroit. They report that **Richard Rumley, M.D. '78,** and **Susan Foreman, M.D. '78,** have a new baby boy and are doing fellowships in Jackson, Miss. in internal medicine and pediatrics, respectively. They also write that **Karen Ogle, M.D. '78,** has a new daughter and is practicing and teaching part-time in family practice in Lansing, Mich.

Omission

Because of incomplete information supplied to the Bulletin the following names were inadvertantly left off the list of Co-Founders Club members in the Fall 1981 issue: **Dr. W.R. Jordan,** Fayetteville, and **Dr. Zachary T. Long,** Rockingham.

Steven Richard Sherwin M.D., '79, has been elected junior fellow chairman of District II (New York and Bermuda) of the American College of Obstetricians and Gynecologists for a one-year term beginning fall 1981.

Alan Rauch, M.D. '79, is in his last year of residency in Pediatrics at Children's Hospital, National Medical Center in Washington, D.C. He will become an N.I.H. clinical associate July 1982 at National Institute of Child Health and Development.

80s

Kenneth E. Hollingsworth, M.D. '80, has completed Naval Flight Surgeon training at the Naval Aerospace Medical Institute, Pensacola, Fla. He was designated a Naval Flight Surgeon and received his "Wings of Gold." His duty is with the 1st Marine Aircraft Wing, Iwakuni, Japan.

Carl D. Pate Jr., M.D. '82, received the School of Medicine's Frank Dameron Award in recognition of his achievements as a medical student and his commitment to return to his hometown in a medically deprived area to practice medicine.

Joan L. Templeton, M.D. '83, was incorrectly idenitifed as Joan L. Thompson in this section of the last issue of the Bulletin. The editors regret the error.

Death

Paul Bernhardt Toms, C. Med. '43, Martinsville, Va.

'Lost' alumni—

The Medical Alumni office does not have current addresses for the following. If you have pertinent information, please send it to 231 MacNider Building 202H, Chapel Hill, N.C. 27514

Rudolf Franz Albert, M.D. 1964
James Harold Arnold, C.Med. 1948
Edgar Norman Boseman, C.Med. 1928
Cornelius Fitzharold Cathcart, M.D., 1976
Ronald Patterson Conoley, M.D. 1976
Leon Douglas Davis, M.D. 1975
Stephen Michael Dorman, M.D. 1974
Martha Louise Elks, M.D. 1977
Maynard "Darvy" Fuller Jr., M.D. 1975
David Lee Gaston Jr., M.D. 1979
James "Ewell" Graham Jr., M.D. 1974
Gary Howard Greenspan, M.D. 1976
Joseph Hodge, C.Med. 1952
Margaretia Louise Jackson, M.D. 1974
Michael Charles Jones, M.D. 1972
Stephanie Lois Kodak, M.D. 1974
Peter Clark La Rowe, M.D. 1964
Dorothy Mae Linster, M.D. 1978
Philip Lee Martin, M.D. 1973
Michael Wells Meriwether, M.D. 1975
Gary Stewart Niess, M.D. 1973
Marshall "Harrell" Odom, M.D. 1975
Danise "Gretchen" Sampson Okiye, M.D. 1977
Thomas Keller Pettus, M.D. 1980
Frank Rainage Pilcher III, C.Med. 1933
Karl Arthur Ray, M.D. 1966
Janifer C. Roberts, M.D. 1977
Adolfo Bartolome Rodriguez, C.Med. 1908
Robert "Mack" Rudisill, C.Med. 1949
Thomas Charles Shea, M.D. 1978
Michael Andrew Stang, M.D. 1975
John "Griffith" Steel, M.D. 1977
Guy Kenneth Terrell, C.Med. 1949
Roger Atkinson Way, C.Med. 1934

You are hereby appointed as a reporter for the Medical Alumni Bulletin. Please give us the latest information on you, your family, your work and your plans. If we have your address or name wrong, *tell us!*

NAME: _____
ADDRESS: _____

UNC DEGREE(S): _____ YR. COMPLETED: _____ NCMH RESIDENCY (√): _____ YR. COMPLETED: _____

Return to Medical Alumni Office, 231 MacNider 202H, Chapel Hill, N.C. 27514

Physicians learn to be managers

Family medicine residents answer phones, schedule appointments and attend nursing meetings. It's all part of their training to be managers as well as doctors.

Learning firsthand what office and paramedical personnel do is only one aspect of the practice management program coordinated by John Aluise and Stephen Bogdewic in the department of family medicine. Aluise holds a master of business administration degree and Bogdewic has a master's degree in counseling and psychology.

"A doctor's medical practice is actually a small, private business," Bogdewic said. He explained that with medical practice becoming increasingly complex, business management skills are almost essential.

"The physician doesn't have the luxury of just being clinically oriented," Aluise said. "Management provides a valuable addition to professional growth."

The program, begun at UNC-CH in 1977, does not aim to give residents the equivalent of an M.B.A., but rather to help them develop the management skills they will need to run an efficient and effective office practice.

Residents in the practice management program receive advice on selecting a community in which to practice and are encouraged to practice in areas underserved in primary care.

Results have been encouraging. According to 1981 statistics, nearly 60 percent of the graduates from the eight family medicine residencies in North Carolina are staying in small North Carolina towns.

This shows graduates are skilled and confident enough to develop new medical practices, Aluise said. "The statistics show they got the message and they're applying it."

Drs. Doug Henley (M.D. '77) and Chris Aul (HS '80), both graduates of the program, found that the skills they learned helped a great deal when they recently set up their own practice in Hope Mills, a small, rural North Carolina town.

John Aluise (right) coordinator of the practice management program, discusses time management and other skills with Drs. David Jones (left) and Marc Guerra. Jones and Guerra, family medicine residents, are able to use the department's audiovisual system as an additional teaching aid.

"In our situation we knew we would be making all the decisions in setting up a practice. We knew what we did would make or break us," Henley said.

Another family medicine graduate, Dr. Tom Speros (M.D.'76), said he was better able to meet his patients' needs as well as his own by applying the principles he learned in the practice management training. "It's a very comprehensive program," he said. "We learned everything from how to select a community in which to practice to buying equipment and dealing with day-to-day office matters."

The residents also learn about some of their professional and legal obligations, such as medical incorporation requirements and malpractice insurance, selection of a lawyer and hospital privileges.

The program for residents involves one-to-one training in addition to monthly and yearly seminars. And the training doesn't end there. "We act as an outreach to office personnel," Bogdewic said. Through on-site office visits, seminars and workshops, Aluise and Bogdewic train office personnel and practicing physicians.

"Management skills are a means, not an end, to a more successful practice," Aluise said. Working with secretaries, nurses and other personnel in the family practice center at N.C. Memorial Hospital, residents learn the roles of various members of a doctor's staff. Understanding the personal and business needs of these people enables the physician to communicate more effectively and everyone benefits.

"The bottom line is better patient care," Speros said. "Through the practice management training I developed an awareness of how important it is to take care of people and have an efficiently run office."

□

Calendar

Medical Alumni Activities

May		
7	N.C. Medical Society Annual Meeting Social Hour	Pinehurst
September		
25	Co-Founders Meeting	Chapel Hill
October		
30	Visiting Committee meeting	Chapel Hill
31	Medical Alumni Council fall meeting	Chapel Hill

Continuing Education

April		
28	Update in Diabetes—1982	Coliseum Howard Johnson's, Greensboro
30-May 1	Intraocular Lens Implanatation Workshop	Berryhill Hall
30-May 3	Innovations in Electrical Modalities	Berrhill Hall
May		
7-9	Carolina-Virginia Critical Care Medicine	Ft. McGruder Inn Williamsburg, Va.
12	Surgical Problems in Reproductive Endocrinology and Infertility	Lenoir Co. Hospital, Kinston
20-21	Modern Management for Acute Leukemia	MacNider Building
21-23	Preschool Special Child Workshop	Berryhill Hall
21-22	Sexually Transmitted Diseases Symposium	School of Pharmacy Auditorium
26	Newborn Resuscitation Workshop	Berryhill Hall
28-30	Workshop on Laparoscopic Technique	Holiday Inn Wrightsville Beach
27-28	TEACCH Conference: Autism and the Family	Paul Green Theater, Chapel Hill
June		
10-11	Sixth Annual Family Medicine Conference Day	Berryhill Hall
11	CAPD Dialysis Meeting	Hotel Europa, Chapel Hill
July		
17-18	Practical Dermatology	CME Center, Boone
August		
2-6	Myrtle Beach Workshop	Convention Center, Myrtle Beach
28-29	Practical Dermatology	The Hilton, Wilmington

For more information about C.M.E. courses, contact the Office of Continuing Medical Education, 231 MacNider 202H, Chapel Hill, N.C. 27514; (919) 962-2118.

Medical Alumni Bulletin
231 MacNider Hall 202A
Chapel Hill, N.C. 27514

Nonprofit Organization
U.S. Postage
PAID
Chapel Hill, N.C.
Permit No. 24

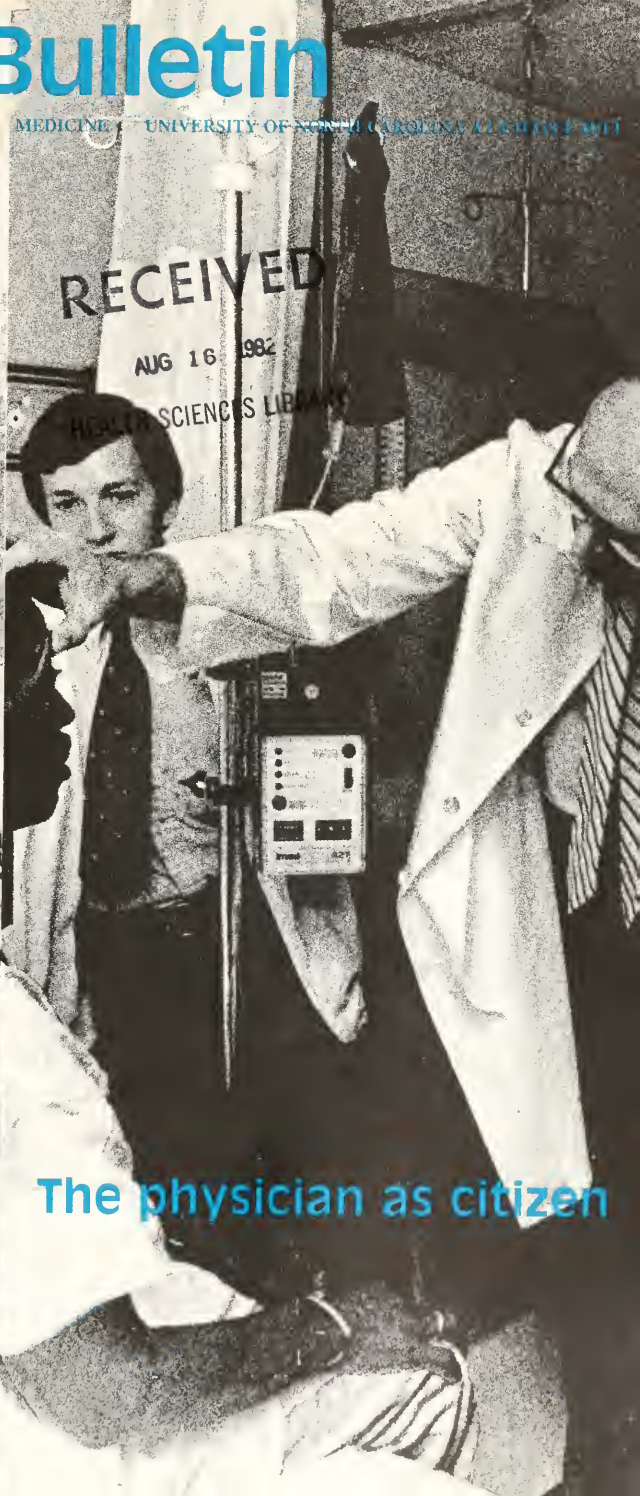
RECEIVED

PERIODICALS DEPT
HEALTH SCIENCES LIBRARY 22
CAMPUS

Medical Alumni Bulletin

VOLUME 28 SUMMER 1982 SCHO MEDICINE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL

RECEIVED
AUG 16 1982
HEALTH SCIENCES LIBRARY



The physician as citizen

Medical Alumni Bulletin

ADVISORY BOARD
Gerald W. Fernald, M.D., '60
Thomas R. Griggs, M.D., '69
A. Myron Johnson, M.D.
George Johnson Jr., M.D. '50
Noel B. McDevitt, M.D., '64
Paul L. Munson, Ph.D.
William S. Pollitzer, Ph.D.
William B. Wood, M.D., '56
Chairman
Richard A. Boyd, M.D., '56
ex officio
Marvin M. McCall, M.D., '56
ex officio
John W. Stokes
ex officio
Shahane R. Taylor Jr., M.D., '59
ex officio

EDITOR
John W. Becton, M. Div.

DESIGN
Nancy Raasch

EXECUTIVE EDITOR
John W. Stokes,
Director, Medical Center
Public Affairs

The *Medical Alumni Bulletin* is published quarterly by the UNC-CH Medical Alumni Association, Chapel Hill, N.C. 27514. Postage is paid by the non-profit association through U.S. Postal Permit No. 24. All correspondence should be addressed to the editor at N.C. Memorial Hospital 204H, Chapel Hill, N.C. 27514.

Contents

The deputy is in **2**
The ultimate public health challenge **6**
A reverend doctor **8**
Taking the faculty to them **10**
1982 residency appointments **18**
A matter of team work **20**

Behind the lines

We have been justifiably criticized at times for not letting you know the dates of Medical Alumni Weekend soon enough. We'd like to correct that problem henceforth.

March 25-26, 1983 — that's the date of next spring's Medical Alumni Weekend. Plans are being made for the program and other activities. You'll hear more as details fall into place. For now, put it on your calendar. You'll be glad you did when the dogwoods begin to bloom again in Chapel Hill.

To err is human department: Dan Veazey, M.D. '81, was supposed to have been mentioned in this space last issue, but his name was inadvertantly omitted. He's another of Dean Smith's lettermen who went on to medical school. Now a resident in family medicine at Charlotte Memorial Hospital, Veazey served as manager of the Carolina basketball team from 1973-76.

This was called to our attention by Alex H. Veazey, HS '54, who noted that while his son was with the team "we saw him as much on TV as we did in person."

The legacy of the late Edgar T. Beddingfield Jr., C. Med. '46, includes his philosophy of the physician's responsibility to the entire community. It was a philosophy he espoused in word and deed.

Most physicians "do a good job . . . in our prime duty of taking care of our own patients," he would say, "but every single one of us has a larger responsibility. After we take off the white coats and depart from the office or the hospital . . . we are then medically knowledgeable members of the community."

In the pages that follow, you can read about the activities of several medical alumni in their roles as medically knowledgeable members of the community.

Charles Fulghum, M.D. '54, is a physician who's also a minister. Henry Lesesne, HS '70, has traveled to Kenya to provide CME for medical missionaries. Judy Lipton, M.D. '74, believes that preventing nuclear war is the ultimate public health challenge, and she actively pursues this concern as a leader in Physicians for Social Responsibility.

We lead off with a feature story about Hamp Hubbard, C. Med. '45. You can read about his activities as a physician who's also a deputy sheriff, beginning on the next page.

—JWB

A urologist by profession, he wears several hats

There were witnesses. They had seen the suspects leaving the scene of the crime. A real break for the sheriff's department — except that the witnesses could recall few details about the getaway car or its occupants.

Fortunately, one of the deputies was skilled in hypnosis, and he used this skill to unearth the facts buried in the witnesses' memories.

This particular deputy spends more of his time as Dr. Hampton Hubbard, '45, than as Deputy Hubbard. He learned the use of medical hypnosis in medical school, and occasionally uses it to help put patients at ease.

The Clinton urologist's involvement in law enforcement began just a few years ago, but the interest that sparked it has been there much longer.

"Sometime in 1978, I talked with the Clinton police chief and offered my services as a consultant, since they didn't have a police surgeon," Hubbard said.

The offer was gladly accepted. As police surgeon, Hubbard is involved in physical training for the department and leads conferences on physical and emotional problems of the staff.

The Sampson County sheriff was interested in similar help, and a little more.

"He asked also if I would be a special deputy, which would expand my duties. I said, 'Sure.'"

Within about a year, his involvement expanded even further — from special deputy to deputy.

Off duty from his medical practice, Hamp Hubbard, '45, swaps his white coat for a deputy sheriff's uniform.

"In 1979, they started a course for members of the community who were special deputies. It was the same justice department course required for all law enforcement officers."

After attending this course nights and weekends from July to November, Hubbard became a full fledged deputy sheriff, with all the jurisdiction of any other officer. The only difference is that he's not on the payroll.

"I've always been fascinated with law enforcement," Hubbard said. "Some of my spark (for getting involved in law enforcement) was related to my time in the military doing investigative work for the judge advocate general in cases related to litigation. I enjoyed being an 'amateur detective.'

"In a sense, every physician is a detective, faced with sleuthing out problems."

Some of the problems Deputy Hubbard helps sleuth out are bigger than others.

An elderly farmer went out to his "back 40" to repair fences and didn't return for supper. Hubbard was among the law enforcement officers involved in an all-out search.

"We found him the next morning. He was in good shape, but hungry and thirsty. He just got lost in the woods."

At another time, the deputy/doctor found himself at the command post during a massive drug bust, interrogating some of the accused, and taking fingerprints and photographs.

One of Hubbard's more enjoyable assignments as a deputy sheriff has been crowd and traffic control at the world famous Hollerin' Contest in Spivey's Corner, just up the road from Clinton.

Law enforcement, however, is not as action packed as television and movies may lead one to believe.

"You spend a great deal of time sitting and waiting," Hubbard said. "And there's tons of paperwork. It's like medicine in that respect."

Hubbard generally avoids being the arresting officer, and he further seeks to avoid cases that might involve any of his patients or members of their families.

Sometimes when he's on duty, such as at the Hollerin' Contest, patients are surprised to see him in uniform. Sometimes they don't even recognize him. But his work as a deputy sheriff has never caused any problem for him as a physician.

On the other hand, his work as a physician can be an asset in performing his law enforcement duties. The time he used hypnosis has already been cited. Another example is the use of medical investigation skills, especially as they have been sharpened by

Dr. Hubbard in his office

Hubbard's serving as one of six medical examiners for Sampson County.

"Having a medical examiner's eyes is a benefit (for a deputy sheriff) at a crime scene search," he noted.

"I feel good about being a part of law enforcement as another professional helping out in something I appreciate," Hubbard said.

Hubbard earned his certificate of medicine from UNC-CH in 1945 and went on to complete the requirements for the M.D. degree at the Medical College of Virginia in 1947. While at MCV, he worked as an extern in psychiatry and learned medical hypnosis.

Hubbard's military service began during his pre-med days at UNC-CH and concluded when he retired in 1972 to become Clinton's first urologist. As Captain Hubbard of the U.S. Navy Medical Corps, he served as chief of urology at the Naval Hospitals in Philadelphia and Bethesda, and as director of medical education at the Naval Hospital in Oakland, Calif.

Chapel Hill provided not only the foundation for his medical career, but also a partner to share it with. In 1946, Hubbard married Anne Holmes of Chapel Hill, daughter of the late Kenan Professor Urban Tigner Holmes. Recently, Anne Hubbard completed a term as president of the North Carolina Medical Society Auxiliary.

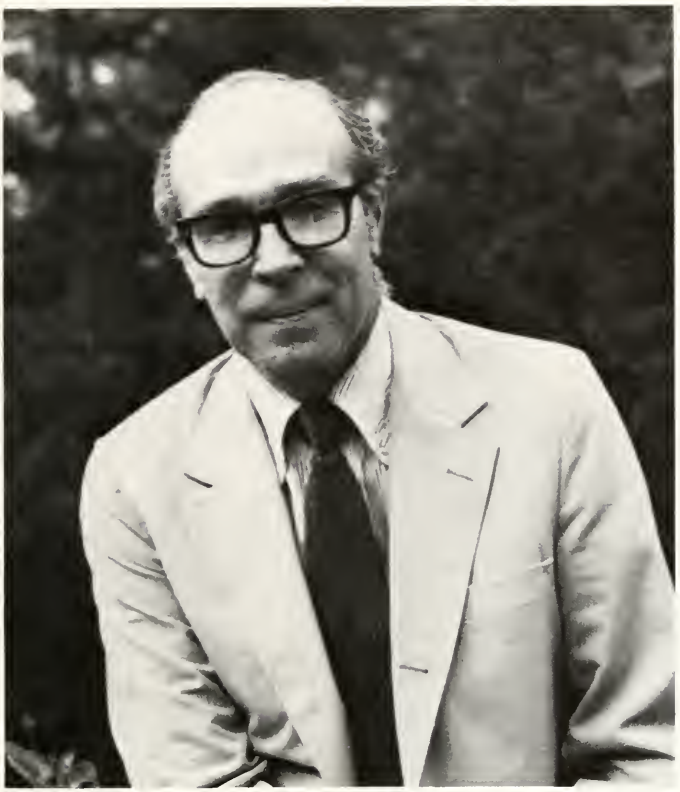
The Hubbard's six children have provided them with 11 grandchildren. Two sons have followed their father into the Navy (both are graduates of the U.S. Naval Academy), and one daughter has made a career of one of her father's hobbies — art.

Hubbard's interest in art includes ceramics, medical illustration, painting and photography. Another hobby is gardening. (If you're ever invited to lunch at the Hubbard's be sure to ask for the fresh spinach salad.)

Music is more of an avocation than a hobby. Hubbard has played piano and timpani with the Charleston (S.C.) and N.I.H. symphony orchestras, and he still organizes local chamber groups.

Then on Sunday mornings, Dr.-Capt.-Deputy Hubbard becomes the organist/choir director for the local Catholic Church.

He speaks from all these roles, when he explains his reason for being involved in each of them: "One of life's fulfillments is giving service to your fellow man." □



Dean's Page

The theme of this issue of the Bulletin, The Physician as Citizen, deserves serious reflection. It is not inevitable that the modern physician be a good citizen in the community. The physician is set apart from other citizens by many factors: the motivation to be a physician; the unique and sharply focused educational experience; the ethical and legal responsibilities peculiar to the physician; the authorities of the physician; the unique interpersonal relationship of the physician and the patient; the daily experiences with the outcomes of practice, sometimes marvelous, sometimes searing and often emotionally draining; and, some would say, income.

And yet there are abundant examples in our own state and time, as well as in other times and places, of the power of physicians as citizens to enrich both the community and the profession through their citizenship and to add to their own lives a dimension of fulfillment otherwise not present. The information, insights and perspectives of the physician appropriately presented can immensely enhance the community.

Yet to be an effective citizen, the physician must often step out of professionalism and this is not always easy. In this issue of the Bulletin, several of our alumni who have succeeded share their experiences with the ways and means of contributing to the fulfillment of the religious, political, cultural, educational and social life of the community while caring for the people as physicians.

Stuart Bondurant

Giving attention to prevention

Dr. Lipton

By Judith Eve Lipton, M.D. '74

I have had nuclear nightmares ever since I can remember. As a young child, born in Chicago in the early 1950s, I remember air raid drills, and being told not to eat the snow, "because it had Strontium 90 in it."

In 1959, we moved to Chapel Hill, and I thought that we were the only ones in Chapel Hill without a fallout shelter.

During the Cuban Missle Crisis (1962), I wrote a letter to Khruschev, asking him not to bomb the United States, because then all the children in both countries would die. I suppose that in some ways I have changed very little.

The accident at Three Mile Island occurred in March 1979, and a week later, an advertisement appeared in the New England Journal of Medicine titled "A Medical Statement on Nuclear Power." The ad summarized the dangers of nuclear power and solicited memberships in an organization called Physicians for Social Responsibility. I sent in $25 and forgot about it.

Two months later, I received a call from Boston, from someone in P.S.R., asking if I would form a Washington chapter. At first I said no, I had two children, two stepchildren, a University of Washington faculty position and a show horse, and I had no time at all and no experience in that sort of thing. However, they persisted, and I reluctantly agreed.

Thus, the Washington chapter of Physicians for Social Responsibility started out with me sitting in my kitchen, calling friends, and saying "Are you worried about nuclear war?" Many people thought I was a little daft, but by the end of the summer I had about 25 members, and we held our first meeting.

In September 1980, Dr. Helen Caldicott, national P.S.R. president,

came and stayed with my family for four days. It had taken much effort to arrange for her visit and the talks she gave while in Seattle. I heard her describe the horrors of nuclear war nine times in four frantic days. By the end, I felt as though I had seen the fires of hell. My life would never be the same.

I spent all of a beautiful fall studying burns, blast injuries and fallout. I attended the third national P.S.R. Symposium on the Medical Consequences of Nuclear War. The two-day presentation in San Francisco drew a crowd of 1,000.

At that meeting, it was decided that Seattle would be the site for the next symposium.

By the spring of 1981, our chapter, which had been growing steadily, had an office and I was giving an average of two or three lectures a week. Our steering committee met weekly in preparation for the symposium.

Our symposium was a success. We sold out 1,200 tickets more than 10 days before the symposium, and we estimate that we had to turn away more than 2,000 people. Every major newspaper in Washington, plus all the local TV and radio stations, as well as the UPI, sent reporters. We had front page headlines the next day.

I had the honor of being the first speaker in the symposium. Our major speakers included John Kenneth Galbraith, Roger Fischer, Herbert Abrams, Bernard Feld, Jerome Frank, Jack Geiger, Victor Sidel, Paul Beeson, Admiral John Lee, Charles Strong, Helen Caldicott, John Constable and Jerome Grossman.

Following the symposium, our little office was deluged with requests for speakers, our membership grew to more than 400 and our mailing list swelled to 1,000 persons and organizations.

I continue to do two to five lectures a month, mostly to medical audiences. Speaking trips have taken me to British Columbia, North Carolina, Montana, Oregon and all over western Washington. I also continue to lead the executive board meetings, and I have been called the president of the chapter since 1980.

Why am I involved? Fear — I lie awake at night imagining my golden-haired 3-year-old covered with third degree burns. And love — this may be the only life in the universe. And anger — I am sick with rage, that humanity could dare to contemplate sterilizing the planet.

One bright morning in September 1979, a "war games" tape was mistakenly fed into a Strategic Air Command computer, which interpreted it as an actual attack on the United States by the Soviet Union. A world-wide nuclear alert was sounded and lasted for six minutes before the error was discovered. By that time B-52 bombers loaded with nuclear weapons were headed for Russia.

The accidental nuclear war that could have occurred within an hour would have resulted in about 200,000,000 immediate deaths and at least 60,000,000 injuries. Yet there was very little publicity about this "near miss."

Noted experts such as Bernard Feld, Richard Garwin and George Kistiakowsky give us at best a 50-50 chance of avoiding nuclear war with the Soviet Union before the year 2000.

The United States has 30,000 nuclear weapons, the Soviet Union has 20,000 and France, England, China and India have about 5,000. Both the United States and the U.S.S.R. have weapons in the one to 20 metagon range, or 70 to 1,400 times more powerful than the bomb which destroyed Hiroshima.

Nuclear war is more likely now than ever before, most importantly because of a change in U.S. policy from Mutually Assured Destruction (MAD) to Worse, a notion of "counterforce" or "limited" nuclear war that supposedly could be won.

Yet the detonation of even a single nuclear "device" in an urban area would be a disaster that would overwhelm the entire country's medical facilities.

The explosion of a 20-megaton groundburst (equal to 20 million tons of TNT) would produce a fireball with a radius of 1.5 miles and temperatures of 20 to 50 million degrees, which would literally vaporize buildings, roads and living things. All that would be left of a city's downtown would be a crater about 300 feet deep. At six miles from the epicenter, all people would be instantly killed by a huge, silent heat flash, traveling at the speed of light. Glass would melt, and buildings would collapse when hit by a supersonic shock wave and winds in excess of 300 miles per hour.

Blast and burn effects would inflict almost total casualties out to a radius of 10 miles, and 50 percent casualties to 20 miles. All frame houses would be demolished at 20 miles from the epicenter. The spontaneous ignition of flammable materials, oil and gasoline storage tanks, and LNG tanks could cause a firestorm, which would increase the lethal radius five-fold.

Immediate injuries would include severe burns; traumatic injuries to the head, thorax, abdomen and long bones; piercing injuries of all sorts; crush injuries from collapsing structures; deafness from punctured ear drums; and blindness out to a radius of 50 miles, in those who happen to glance reflexively at the fireball.

Rampant epidemics of all common infectious diseases, particularly the enteric pathogens, would threaten survivors. Radiation would compromise their immune systems, already weakened by desperate shortages of food, water and shelter. Millions of rotting corpses would be breeding grounds for mutant bacteria, viruses and radiation resistant insects, which would serve as further vectors of disease.

Dr. Howard Hiatt, dean of the Harvard School of Public Health, expressed the medical viewpoint perfectly: "If we examine the consequences of nuclear war in medical terms, we must pay heed to the inescapable lesson of contemporary medicine: Where treatment of a given disease is ineffective, or where costs are insupportable, attention must be given to prevention. Both conditions apply to the effects of nuclear war."□

Judith Lipton earned her M.D. from UNC-CH in 1974. She received the Merck Award for excellence in medical studies in 1972. A psychiatrist in private practice in Bellevue, Wash., she completed her post graduate training at the University of Washington at Seattle and Stanford University. She is a consultant to the Family Counseling Center of Lynnwood, Wash., and president of the Washington Physicians for Social Responsibility.

Psychiatrist/preacher has had "The Human Condition"

By Charles B. Fulghum, M.D. '54

I am quite surprised that our editor asked me to write about my citizenship activities outside my medical practice. I would have thought citizenship meant political activities. My extra-medical activity is in the church. I am a preacher. (I imagine this surprises those friends who grew up with me. It surprises me, too.)

I am the assistant rector at the Episcopal Church of the Atonement in Atlanta. I preach once or twice a month, and carry on an acceptably active ministry in the community. This is, of course, in addition to doing a full-time private psychiatric practice in my office and the hospitals.

I never planned to preach, and still have no ambitions to be a career clergyman — I simply never wandered away from the church as most of us do in college or in a busy medical practice. In college, even before, when I was in the navy, I sang in the choirs. I loved the music, but I never thought of myself being in church to participate or listen to anything more than the music.

After my marriage to a Roman Catholic, I consciously chose and joined the Episcopal Church. Then, wanting to be with my children in church, I left the choir and started teaching Sunday school. I was surprised that Sunday schools are more like group therapy than school, so I was good at it.

The rector of the church I was working in was becoming crippled and disabled with rheumatoid arthritis. He needed more ordained people to help administer the sacraments. Doctors, at that time, were the popular candidates for an Episcopal ordination to a ministry called perpetual deacons. Doctors are thought to be professional, intellectual and quite addicted to studying for examinations, so they were easy to train, discipline and trust.

At the time, deacons were expected to do nothing more than administer the sacraments on Sunday morning. To prepare for the ordination, I studied at home, under the direction of my rector, and passed the regular cannonical examinations for ordination. I was ordained in 1965. By then the rector who needed me had resigned his church. I think that would have been the end of my ministry had I not lost my music ability with a severe hearing loss due to Meniere's disease. Simultaneously, I grew unable to sing and the regular clergy began asking me to preach.

After my ordination, I was assigned by the bishop to work under a rector who was one of my close friends. The friend claimed he liked my sermons and wanted me to preach often. In retrospect, I think that as sermons they were pretty awful, but I had done a lot of teaching so I thought of them as just another lecture to people who had to listen to somebody on Sunday morning.

No one was bored; I made sure of that. I had had no formal training in homiletics, and knew very little theology, but in the '60s, pastoral psychology was in vogue. Sin was sickness, pastors were counselors and healing was salvation. My sermons were very good mental health lectures. The people recognized this, and at the end of the service would tell me they enjoyed my "talk."

Religion and mental health conferences were very popular in those days, and being ordained and a psychiatrist, I enjoyed some popularity as a keynote speaker for those meetings. I discovered two things: I was much more religious than I had suspected, and I was much more comfortable with clergy than I ever had been with doctors.

I began attending clergy conferences, took my preaching seriously, studied more theology, and soon discovered that my bishop and other clergy were beginning to think of me as one of them. (I suspect the medical profession has always mercifully considered me a bit eccentric.)

As a deacon, I am supposed to be an assistant to the rector, but on two occasions, the rectors under whom I was working have resigned, leaving me alone in the parish. A deacon cannot be in charge of a parish, but I have often been the only one left to do the funerals, weddings and hospital calls.

I have occasionally visited the hospital to commune the sick, and then changed my clerical collar for my white coat to do a psychiatric consultation.

I use all the psychiatry I know as a minister, but unless I am treating a minister, I never use the theology in my psychiatric practice. Indeed, since there are some labeled "Christian psychiatrists" around, I'm generally careful to keep my offices separate and most of my patients do not know of my church activities.

In recent years, my responsibility in the church has increased, and I have found my lack of formal theological training a severe handicap. I am now a special student in theology at Emory University. I have always read philosophy, anthropology and history, and much to my surprise, those studies are what they teach in the seminary.

Apparently, I am one of those who like going to school. I am having the time of my life, studying, competing with the other students, and writing papers and examinations to show the professors how much I know. Since I have no particular future in the church, there's no way I can fail. I wonder if there's some way to make professional schools this much fun the first time around.

On the balance, I prefer the practice of medicine, and I believe that psychiatry will always be my first

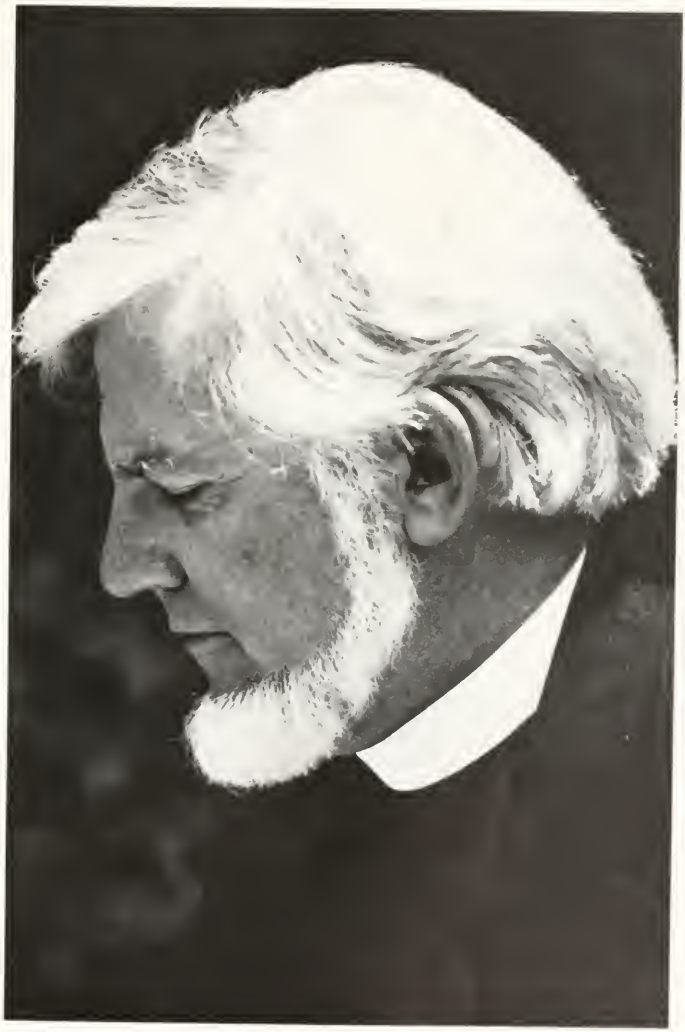
30-year course called

profession. I hope so. Doctors can nearly always actively respond to people in distress. That gives one a sense of effectiveness that ministers have to learn to do without. But people, finally, can't be cured. They remain people, striving and frustrated; they need more than the "now" response that doctors are limited to.

When I was a psychiatric resident, they were not teaching a course called "The Human Condition." But I have learned much about that problem listening to troubled people tell me about it for 30 years.

Theology begins with "The Human Condition," the one that's untreatable, inconsolable and permanent. For most people it is not a happy state. Most people don't know that their present frustration is not temporary. As a minister I get to work with many people who are not my patients and who will never be the (psychiatric) patients of any one. I get to work with people who need to know what I know about living in disharmony and loneliness.

At the end of my medical day, I have the opportunity to reassure people who are not sick, not peculiar and not failures because they have not become the special people they were reared to be. The church teaches that all people are respectable as they are. Diagnosing respectability is nice relief from the profession that looks for things that are wrong with people. □



Dr. Fulghum

Dr. Charles B. Fulghum was a member of the first four-year class of 1954. He completed his psychiatric residency at N.C. Memorial Hospital in 1958. He was a staff psychiatrist at Dorothea Dix Hospital for one year and he taught psychiatry at Emory University for two years. Since 1961, he has been in full-time private practice in Atlanta.

An opportunity to teach and learn

By Henry R. Lesesne, M.D., HS '70

Missionary physicians and dentists throughout the world have a great desire to stay abreast of new developments in their areas of practice and are under the same mandates as personnel in the United States from the AMA and ADA for required continuing education. How do these physicians and dentists do this while "out in the bush"?

This question was addressed by the Continuing Medical Education Commission of the Christian Medical Society (CMS) in 1976, and out of these deliberations came the answer — to take faculty to the missionaries where they are. The initial symposium was held in Liberia, West Africa in 1978 and a second one was held in Kenya in 1980. The response was great, and because of this success, the Protestant Churches Medical Association of Kenya asked CMS to return in 1982. With the help of the University of Louisville School of Medicine, the Third International Symposium on Continuing Medical Education was held at the Brackenhurst Baptist Conference Center, Limuru, Kenya from Feb. 23-March 4.

The purpose of the symposium was threefold: (1) an intensive time of learning with formal medical and dental lectures and discussions from a variety of specialists, including those well experienced in mission medicine; (2) an opportunity for those who are ordinarily widely separated to join together for professional and personal interchange; and (3) a time of spiritual and physical renewal in the atmosphere of a retreat. As a member of CMS and a gastroenterologist, I was asked to join 14 other faculty from the United States and Canada and 24 from the mission field to update these doctors in our respective fields.

Having never been outside of North America, my wife, Jean, and I approached our trip with some anxiety. However, the trip proved to be a highlight for our lives. We arrived in Kenya after a brief stop over in London and proceeded to the conference ground which years ago had been a hunting lodge.

We found ourselves in a beautiful area, nestled in rolling hills. In addition to the faculty, we joined 100 missionary physicians and dentists and their wives from a variety of countries in and around Africa.

Dr. David Stewart, a psychiatrist from Louisville, Ky., and a former missionary, was the coordinator. He compiled an intensive program for the participants, covering all areas of medical and dental practice. Most of the participants were able to acquire 60 to 70 hours of Category I CME credit.

Interspersed with the courses were several special sessions titled "Pearls and Serendipity of Missionary Medicine." At these sessions, missionaries shared their answers to challenges especially peculiar to their practice (e.g., the use of the new rabies vaccine, solar power for irrigation and electricity, computer use on the mission field and even advice on how to keep the hospital latrines clean).

Each day was begun with devotions, and each evening sessions on the spiritual aspects of medicial-dental missions were led by the missionaries. The entire conference was exciting, stimulating and challenging.

As a gastroenterologist, I was interested to find out that peptic ulcer disease due to heavy alcohol intake is a very common disease often requiring surgery. Because of this, many wanted to learn more about fiberoptic endoscopes for diagnosis (costs, how to, etc.). Hepatocellular carcinoma is a real concern as well, probably due to

Dr. Lesesne speaking in Kenya

This former hunting lodge (page facing) was "campus" for Dr. Henry R. Lesesne during the time he helped provide CME for medical missionaries in Kenya.

the high incidence of the hepatitis B virus.

I also was encouraged to see the heavy emphasis on preventive medicine, especially the training of the local people as community health care workers. These workers are trained to care for the common illnesses (e.g., diarrhea, skin diseases) without the need for a physician.

A major obstacle on the missionary field is the passive acceptance of suffering, disease, and death — "after all, we've always had worms, and we are still alive." The missionary doctors also realize that "cure eliminates prevention" and must deal with this daily — trying to steer away from cure without also encouraging prevention (e.g., surgery for ulcers plus getting at the alcohol problem).

Most of the challenges to these missionary doctors are similar to mine except, of course, the different environments and related difficulties. One difference really became evident concerning medical technology. I work in a highly sophisticated medical system at N.C. Memorial Hospital. I struggle daily with ordering newly developed tests and procedures which aid in the diagnosis and therapy of my patients. I have to choose wisely which test or examination to employ, considering its usefulness, safety and cost for the patient. At times it is a "burden" to do this.

Among the friends the Lesesnes made in Kenya was Birch Rambo. Rambo has been with the Presbyterian mission in Ziare for 20 years, during which time he's put three children through UNC-CH. Lesesne delivered mail between Rambo and his two daughters living in Chapel Hill.

Many of the conference leaders found time for some serious photography. Several must now include in their photographic memories a picture of Hank Lesesne photographing them.

Missionary personnel do not have this multitude of tests, and therefore have to depend heavily on their history, physical examination, a few standard, basic tests, and then the patient's initial course. Fortunately or unfortunately (I began to favor the former after my time in Africa), these physicians do not have this "burden of modern technology" and are able to use their basic knowledge and wisdom to render good care. It is a return, in a sense, to the 1930s and the "Oslerian" practice of bedside diagnosis and therapy, to basic medical-dental practice. It was a real reminder to me of the importance of my history and physical examination.

My wife and I made one weekend safari to the Amboseli National Park at the base of Mount Kilamanjaro. This got us "out in the bush." We enjoyed viewing all the animals and seeing the Masi tribespeople in their habitats. These people have resisted change and continued to live as their ancestors.

Since returning home, I have read several books on Africa, one being "Something of Value" by Robert Rouark. This book aided my understanding of the past history of Kenya and the realities of the Mau Mau uprising in the 1950s. Out of it has arisen a country which appears to be one of the most progressive and stable in Africa.

In summary, it was a thrill for my wife and me to be a part of this continuing education project. Others are planned for Malaysia in 1983 (for physicians-dentists in that area) and again in Kenya in 1984. We hope that we can participate and "be educated" further ourselves. □

Dr. Henry R. Lesesne, associate professor of medicine at UNC-CH, earned B.A. and M.D. degrees from Vanderbilt University in 1963 and 1967, respectively. He completed his residency at N.C. Memorial Hospital in 1970. He was a fellow in gastroenterology and clinical pharmacology here from 1970-72 and was appointed to the faculty in 1973. Recently he was a member of the program faculty for the third International Symposium on Continuing Medical Education, presented by the Christian Medical Society and the Louisville School of Medicine in conjunction with the Protestant Churches Medical Association of Kenya.

Extracts

Researchers at the School of Medicine have developed a technique that is helping explain why certain common disorders, such as heart disease and cancer, occur more often in some families than others.

The technique involves studying patients with a rare genetic disorder and then carefully researching the medical histories of their families. Computer analysis of this information has enabled researchers to predict that some people are more likely to suffer from cancer or some other disease than others of their age, sex and environmental background.

The studies have looked at genes associated with a wide variety of common diseases including diabetes, heart disease, cancer, kidney disease, scoliosis, birth defects and mental retardation.

"We have devised a unique way of identifying genes and demonstrating that they are involved in predisposing people to common disease," said Dr. Michael Swift, professor of medicine. "It's very exciting to be able to identify these genes. It will enable us not only to understand how these diseases come about but eventually to prevent them."

The technique was first devised by Swift and his colleagues to search for human cancer genes. Now they have found it valuable for studying other diseases.

Dr. David A. Ontjes has been named chair of the department of medicine at the University of North Carolina at Chapel Hill.

His appointment, effective July 1, was announced by Dr. Christopher C. Fordham III ('49), UNC-CH chancellor, who also announced that Ontjes has been named Eunice Bernhard distinguished professor of medicine.

Ontjes has been a member of the School of Medicine faculty since 1969, when he was appointed assistant professor of medicine. He was promoted to associate professor in 1972 and became a full professor in 1976. He served as chief of the division of endocrinology and metabolism from 1972-81, and has been acting chair of medicine for the past year.

A native of Kansas, Ontjes graduated with highest distinction from the University of Kansas in 1959. He attended Oxford University as a Rhodes Scholar, earning a master's degree there in 1961. He received his M.D. degree *magna cum laude* from the Harvard University Medical School in 1964, and completed his post-graduate training at the Harvard Medical Unit at Boston City Hospital.

Prior to coming to Chapel Hill, Ontjes served three years as a commissioned officer in the U.S. Public Health Service. During that time, he was a research associate in the Laboratory of Chemical Biology, National Institute of Arthritis and Metabolic Diseases in Bethesda, Md.

The Bernhard professorship was established in 1977 by Eunice Brennan Bernhard, a Connecticut philanthropist.

"Dr. Ontjes is a distinguished scholar, teacher and clinician, respected and admired by his colleagues, students and patients," said Dr. Stuart Bondurant, dean of the UNC-CH School Medicine. "This school has benefitted greatly from his leadership in the division of endocrinology and metabolism, on a number of key administrative committees and, most recently, as acting chair of medicine. We look forward to the leadership he will provide in this new role in the years to come."

Dr. Ernest Craige, Henry A. Foscue distinguished professor of cardiology, received the 1982 Distinguished Teacher Award of the American College of Cardiology at the organization's 31st annual scientific session this spring in Atlanta.

The award is presented to a fellow of the college who, because of his or her demonstrated abilities as an unusual and outstanding teacher, is considered to have made major contributions to cardiology through the teaching and training of students at the undergraduate and/or post-doctoral level.

Craige received his B.S. degree from UNC-CH, and he is a graduate of the Harvard University Medical School.

He served as chief of cardiology at the N.C. Memorial Hospital from 1962-78. He has been professor of medicine since 1962, and the Foscue professor of cardiology since 1971.

Dr. David A. Ontjes

Dr. Ernest Craige

Extracts

The Robert Wood Johnson Foundation of Princeton, N.J., has awarded $110,000 to the Health Services Research Center at the University to continue the center's national evaluation of rural medical care programs.

Directed by Drs. Cecil G. Sheps and Edward H. Wagner, the study is an attempt to identify the most effective kinds of rural health programs and the most effective elements in each.

The grant will enable Sheps, Wagner and their colleagues to analyze information gathered during the past three years on 464 programs around the United States.

The researchers are especially interested in learning what types of rural medical care programs provide the easiest access to services and are the most stable, he said.

They also plan to determine how reductions in federal support during the past year have affected the programs.

Sheps is Taylor Grandy distinguished professor of social medicine at UNC-CH and a research associate at the Health Services Research Center. Wagner, the center's deputy director for research, is associate professor of epidemiology and medicine in the schools of public health and medicine.

Previous work on the four-year project has been supported by the Robert Wood Johnson Foundation and the U.S. Department of Health and Human Services.

Residents in orthopaedic surgery at N.C. Memorial Hospital scored in the 96th percentile on the 1981 national Orthopaedic In-Training Examination.

Dr. Frank Wilson Jr., professor of surgery and chief of the division of orthopaedics, said 13 residents took the test late last year. The group achieved its high marks in comparison with all other orthopaedic residency programs in North America.

One physician scored at the 100th percentile, Wilson said, and another scored at the 99th percentile.

The 1981 examination was given to 2,768 residents in the United States and Canada. It consisted of 270 questions in 10 categories, including hand surgery, anatomy, trauma, biomechanics and rehabilitation.

Researchers at the School of Medicine have discovered additional evidence that there may be a genetic trait that can forecast which young people are likely to develop high blood pressure as adults.

In a study published in the New England Journal of Medicine earlier this year, they reported that the rate at which lithium is exchanged for sodium across the membranes or red blood cells is twice as high in boys whose parents both have high blood pressure than in sons of non-hypertensive parents.

Eighteen sons of parents with hypertension and 21 sons of non-hypertensive parents were admitted to the Clinical Research Unit at N.C. Memorial Hospital and grouped according to race and their parents' blood pressure levels.

"Although we carried out many laboratory studies, the only thing that distinguished the offspring of hypertensive parents from those with normal parents was the sodium-lithium countertransport rate," said Dr. James W. Woods Jr., professor of medicine.

Woods stressed that the study only identified a difference between the two groups of boys; it did not prove that one group would later develop high blood pressure. "Until these kids are followed for a long time to determine whether those with high values later develop hypertension, it will be impossible to judge whether this is, in fact, a true genetic marker," he said.

Nobel laureate Dr. Paul Berg, Willson professor of biochemistry at Stanford University School of Medicine, gave a Cancer Research Center seminar at the School of Medicine in April.

He spoke on "Expression of Transduced Genes in Mammalian Cells."

Berg received the Nobel Award in Chemistry in 1980 in recognition of his

Dr. Paul Berg

pioneering work in recombining genes in different organisms. "Dr. Berg did the original thinking in recombinant DNA technology, work that his laboratory continues to be engaged in at the present time," said Dr. John Newbold, associate professor of bacteriology and immunology and a member of the cancer center.

Berg holds a Ph.D. degree from Western Reserve University and has been on the faculty at Stanford since 1959.

The Arthritis Foundation recently granted investigator awards to Dr. Simon L. Newman and Dr. Philip Cohen, both members of the division of rheumatology and immunology, department of medicine.

The grants, which total $53,500, became effective July 1 and will be used to further arthritis research.

Newman, research assistant professor of medicine, is studying how macrophages recognize foreign invaders, such as bacteria, viruses and tumor cells, and destroy them.

Cohen, assistant professor of medicine, is researching the cause of systemic lupus, an arthritic condition common among young women which can lead to injury to kidneys, skin, the central nervous system and other parts of the body.

Extracts

Mark D. Smith (center) a fourth-year medical student, was the recipient of this year's Ciba Community Service Award. Smith received the award for his outstanding work in the area of occupational health studies. A 1979 graduate of Harvard University, Smith is from Greensboro. Presenting the Ciba award is Don Boughton, a hospital sales representative for the company, and Dr. J. Mitchell Sorrow Jr., C. Med. '44.

Brain tumor patients are being given interferon for the first time in the United States in a clinical trial being conducted at the School of Medicine.

Nine adults with gliomas are being administered interferon soon after surgery and prior to a full course of conventional radiation therapy to the brain. The patients will be studied during the next six months.

"The purpose of the study is to evaluate patient tolerance of interferon with special attention to fever, appetite, activity and, in some cases, intracranial pressure," said Dr. M. Stephen Mahaley Jr., chief of neurosurgery and principal investigator.

"The main purpose of this study," Mahaley said, "is to determine the level of interferon which we will use in future studies designed to test its effect on limiting the growth of primary brain tumors."

Dr. Edward V. Staab, professor and associate chairman of radiology, is co-investigator in the study.

Physicians in the Cancer Research Center have developed a new treatment that more than triples the remission rate for patients which acute myelocytic leukemia.

The treatment, called high dose Ara C-asparaginase, helps patients with even the most stubborn cases of the disease regain their normal health temporarily.

The therapy is not a cure, its developers caution, but it does offer many leukemia victims what they and their families long for most — more time.

Dr. Robert L. Capizzi, professor of medicine and pharmacology, described the results of clinical trials with high dose Ara C-asparaginase at the annual meeting of the American Society of Clinical Oncology in St. Louis in April.

In an interview, Capizzi said that of 15 patients who had failed all other forms of treatment, 10 went into complete remission with the new therapy. Of 14 other patients, newly diagnosed with acute myelocytic leukemia, 12 went into remission, and two died of the illness before the therapy had time to take effect.

Also involved in the clinical studies are Drs. Deepak Sahasrabudhe, Don A. Gabriel (M.D. '75), Seth A. Rudnick and Robert Wells of the UNC-CH School of Medicine faculty and Elizabeth McClamrock, a nurse at N.C. Memorial Hospital.

Scientists involved in continuing laboratory research include Dr. and Mrs. Yung-Chi Cheng of pharmacology and Dr. J.L. Yang, a visiting scholar from China.

The studies are being supported by grants from the American Cancer Society and the National Cancer Institute.

The School of Medicine has received $10,116.85 from the American Medical Association Education and Research Foundation.

The gift was presented during the annual meeting of the North Carolina Medical Society May 6-9 in Pinehurst. The AMA Education and Research Foundation, which is supported by individual physicians, AMA auxiliary members and others throughout the country, makes donations each year to the state's medical schools through the N.C. Medical Society.

Dr. Stuart Bondurant, dean of the School of Medicine, said the money will be used for special education, research and operational needs of the medical school which are not otherwise funded.

The check was presented by Anne Hubbard of Clinton, president of the N.C. Medical Society Auxiliary. Dr. William B. Wood (M.D. '56), director of continuing medical education and alumni affairs at UNC-CH, accepted the gift on behalf of the dean. ❑

Class notes

Manning-Berryhill Club

Willis B. Mitchell, C. Med. '34, has moved from Medford, N.J., back to North Carolina and settled in Hendersonville.

Max M. Novich, C. Med. '39, has a second edition of a well-received book "Training and Conditioning of Athletes: A Manual for Coaches, Trainers, and Physicians," scheduled for publication this fall.

40s

Ira A. Abrahamson Jr., C. Med. '46, in the last year has written and had published the following articles: "An Ophthalmologist's Approach to Anterior Segment Photography" in the June 1981 issue of Journal of Ophthalmic Photography and "How the Eyes Reveal Systemic Disease" January 1982 issue of Diagnosis.

50s

Archie D. Walker Jr., M.D. '54, was re-elected to serve another two-year term as secretary of the medical staff at the Chowan Hospital.

Joseph Stafford Redding, HS '58, and his wife, Nancy, vacationed in Erin this summer. They were visited in April by their first grandchild, Kathleen Stafford Redding of Springfield, Va. Joe continues as professor of anesthesiology at the Medical University of South Carolina. During the past year he was re-elected to the board of trustees of the Woods Library Museum and the editorial board of Critical Care Medicine.

60s

Rex O'Briant, M.D. '61, was transferred recently from Houston to Denver as assistant corporate medical director for Atlantic-Richfield's Anaconda Minerals Company.

Mario M. Stone, HS '62, is secretary-elect of The American Academy of Orthopaedics and Neurological Surgery. Stone was presented with a diploma, as captain pilot pioneer of Cuban aviation by the Cuban Pilots Association in Exile. He also was invited by the governor of the state of Quintana Roo, Mexico, as guest speaker, to lecture, perform surgeries and conduct clinics during Child Welfare Week.

Bob Bilbro, M.D. '62, of Raleigh, has been elected one of seven board members for 1982-83, UNC General Alumni Association, as athletic council member.

John R. Curtis, M.D. '62, has been elected president-elect of the Georgia Psychiatric Association. He is director of the University of Georgia Health Service.

Curtis is a senior trustee of the association, which represents some 400 Georgia psychiatrists. In 1980, the association chose him Psychiatrist of the Year. He is also an elected fellow of the American Psychiatric Association.

Curtis is chairman of the governor's Advisory Council on Mental Health and Mental Retardation for the state of Georgia, and is past president and a fellow of the American College Health Association and past president of the Southern College Health Association.

Wesley C. Fowler Jr., M.D. '66, has been promoted to professor of obstetrics and gynecology at UNC-CH.

Dr. Fowler

Hugh Bryan, M.D. '69, is director of the new radiation therapy department at Cape Fear Valley Hospital.

70s

Jerry C. Bernstein, M.D. '70, reports that his second child (second daughter), Blair Adele was born 11/20/81.

He is in private practice of pediatrics with Raleigh Pediatric Associates. A clinical assistant professor of pediatrics in the UNC-CH School of Medicine, he currently heads up the Floyd Denny Pediatric Alumni Society.

Judy Jordan, M.D. '71, married James W. Thomas of San Antonio, Texas on July 17 in Rose Garden, Raleigh. They will live in Nuremberg, West Germany where he is completing a four-year tour of duty with the U.S. Army.

Ronald C. Huffman, M.D. '72, has set up practice at the Boonville clinic.

James F. Donohue, HS '72, assistant professor of medicine at UNC-CH, assumed office as president of the North Carolina Thoracic Society, Medical Section of the American Lung Association of North Carolina, at the society's annual meeting in April.

Thomas R. Dempsey, M.D. '73, is in practice in Mobile, Ala., in pediatric orthopaedic surgery.

Charles M. Reavis, M.D. '73, currently is a pathologist at Lakeland Regional Medical Center. His practice includes anatomic, clinical and forensic pathology. His wife Doris Ann is a "professional" volunteer and full-time mother. They have three children Jonathan, 8; Kristeen, 5; and Brennan, 1½.

Gary Stewart Niess, M.D. '73, is a cardiologist in a group practice in Montgomery, Ala.

Bryan Young, M.D. '74, has entered private practice in thoracic and vascular surgery at Durham County General Hospital in Durham. His wife, Jane, is busy playing tennis.

Joseph R. Pringle Jr., M.D. '75, and his wife, announce the birth of their first child, Ross Newlin, born Jan. 15. The new father is on the pediatrics staff of the Naval Regional Medical Center in Charleston, S.C.

J. Allen Miller, HS '75, is in the private practice of child, adolescent and family psychiatry with the Sacramento Child Guidance Center Medical Group, Inc.

Donald C. Fidler, M.D. '75, assistant professor of psychiatry at UNC-CH, conducted the portion of the seminar on families of physicians at the 17th annual Wilson Memorial Hospital postgraduate symposium exploring the dynamics of the physician and his family.

James Detoree, M.D. '76, has begun orthopedic surgery practice on Hilton Head Island, S.C.

Jean C. Bolan, M.D. '76, was married to John Rider Peaslee of Washington, D.C. She finished a fellowship in maternal-fetal medicine at George Washington University in June and has accepted a position as maternal-fetal specialist at the Washington Hospital Center.

Kenneth Lempert, M.D. '76, became assistant professor of medicine in the nephrology section at West Virginia University in 1981.

Wayne D. Fogle, M.D. '77, has a solo practice in pediatrics in Franklin, up in the Western North Carolina mountains. He recently passed the oral pediatrics boards.

Howard Stang, M.D. '77, and Jill had their first-hand birth experience on 3/20/82: Rebecca Anne Stang weighing in at 7 pounds, 12 ounces. He's presently the only pediatrician at the White Bear Clinic of Group Health Planning.

Charles Gregory Smith, M.D. '77, has joined the state's Solic and Hazardous Waste Management Branch as a toxicologist and environmental epidemiologist.

John D. Davis Jr., M.D. '78, is now in private practice in Blowing Rock. He and his wife are proud to announce the birth of their second daughter, Erin, born last November. Christi is now 3.

Class notes

Anita Sloan Westafer, M.D. '78, has opened an office for the practice of family medicine in Pensacola, Fla.

R. Scott Oliver, HS '78, and Carol, plan on residing in Duxberry, Mass., where Scott will be practicing orthopedic surgery. He has completed his training at Tufts New England Medical Center in Boston.

Dennis E. Mayock, HS '78, has recently been appointed assistant professor of pediatrics at the University of Calgary. He previously was an acting instructor in the department of pediatrics at the University of Washington, Seattle.

Thomas A. Dillard, M.D. '78, has a new addition to his family, a baby girl, Jessica Susan, born Jan. 1982. He has returned to Walter Reed Medical Center, Washington, D.C., with a pulmonary disease fellowship.

John D. Cameron, M.D. '79, has finished family medicine residency in Rockland, Ill., and entered private practice in Asheboro.

Mike Garrison, M.D. '79, and Connie, had another son (Russell) last November. Weseley is now 3. He has moved back to Lexington, where he is in a solo practice of internal medicine.

Tom Barringer, M.D. '79, is going into private family practice with another resident in Charlotte. He and Heidi have a one-year-old daughter named Jessica.

Jeff Buckwalter, M.D. '79, says Mary Jo and he continue to enjoy the cultural and geographic opportunities for new experiences available to them from New Haven. They have been able to travel to Nova Scotia and Cape Cod in addition to visiting NYC occasionally for a play and dinner. They also have found time to start their family. Otolaryngology training at Yale-New Haven has been satisfying with unusual opportunities to learn new techniques in laser surgery and exposure to pioneering research in tinnitus. He has especially enjoyed this year attending several regional meetings in otolaryngology in Boston and NYC.

"We would like to enjoy and welcome getting together with UNC alumni, as we have missed the Tar Heel spirit in New Haven," he writes.

Sharon Foster, M.D. '79, is currently a resident in the four-year med-peds program at Chapel Hill. She had a healthy 8 pound, 2½ ounce baby boy named Mark William Foster on Thanksgiving Day 1981. "Anyone visiting Chapel Hill is welcome in our home and we might even let you babysit," she writes.

Renee Visco, M.D. '79, has completed her fellowship in adolescent medicine and is now director of the Teenage Pregnancy Clinic at the University of Maryland Hospital where she is an assistant professor of pediatrics there. She and husband have a son Colin, age 2.

Herbert H. Thomason Jr., M.D. '79, is currently a resident in the department of psychiatry at the University of Colorado. He was married in April to Dr. Laura Swigart, a resident in dermatology and a native of Denver. Both will be returning to N.C. in 1984.

Federick Kull Jr., Ph.D. '79, has been promoted to research scientist III in molecular biology at the Burroughs Wellcome Co., in Research Triangle Park. He joined the company in 1978.

Dr. Kull

Members of the graduating **class of 1972** have established a fund to provide scholarships for students in the School of Medicine.

The establishment of the fund was announced by Drs. **Thomas G. Irons** and **Howard S. Kroop** during Medical Alumni Weekend activities this spring. The two members of the class of 1972 presented $7,500 to Dr. Stuart Bondurant, dean of the School of Medicine, and pledged that the class would double the gift within the next year.

Irons is from New Bern and Kroop is from Woodbury, N.J.

"It is no exaggeration to say that I can speak on behalf of generations of medical students yet to come in expressing my appreciation and that of the School of Medicine for the generosity the members of the class of 1972 have shown in this gift," Bondurant said.

"This action is important both for itself and for its potential as a model."

Financial aid provided by the fund will be given in the basis of need, Bondurant noted.

80s

Janice D. Key, M.D. '80, and **Lyndon Key, M.D. '77,** have a daughter named Rebecca Louise Key. She was born April 16. Jan is a senior resident in pediatrics at the Children's Hospital in Boston. Lyndon is an endocrinology fellow also at Children's Hospital.

Kenneth E. Hollingsworth, M.D. '80, finished his rotating internship at National Naval Medical Center, Bethesda, Md., in June 1981. He attended a course at the Naval/Aerospace Medical Institute (6 mos.), Pensacola, Fla. in flight surgery and now is a flight surgeon with Marines at Jwakuni, Japan. He participated in Operation Team Spirit '82 in S. Korea. On Jan. 23, 1982, he married Elizabeth Anne Zinn of Crafton, Md.

Sharon Lail, HS '80, has joined the medical staff at Presbyterian Hospital in Charlotte as Presbyterian's first hospital-based neonatologist. She also will do extensive teaching with the hospital's medical staff, nursing personnel and student nurses and will serve as a faculty member of the Presbyterian Hospital School of Nursing.

Barry J. Freeman, M.D. '80, has finished one year of surgery at the Albert Einstein College of Medicine Affiliated Hospitals, moved back to Calif. and is now a resident in anesthesiology at the Los Angeles County-USC Medical Center.

Phillip Mabon Williford, M.D. '81, of Winston-Salem married Susan Sneeden July 10. He is a resident at North Carolina Baptist Hospital and Bowman Gray School of Medicine.

John W. Sanders III, M.D. '81, was married in June to Kathy Cunningham, a former Medical Alumni Bulletin contributing editor. Sanders is beginning his second year of residency in internal medicine at the Mayo Clinic.

What's your diagnosis?

Do you like what you read in the Medical Alumni Bulletin? Maybe you just read what you like. You probably have definite ideas both about what's good about the Bulletin and how it can be improved.

You may have the chance to share these opinions in a scientific readership poll later this year. We'll be asking a representative group of Bulletin readers to participate. Watch for more details in the fall.

Class of 1982 residency placements

ALABAMA

Birmingham: University of Alabama Medical Center
William Lewis Fulcher (family medicine)
Eric David Van Tassell (internal medicine)

ARKANSAS

Little Rock: University Hospital
Sandra Sasser (pediatrics)

ARIZONA

Phoenix: Good Samaritan Hospital
Linda Carol Selsor (internal medicine)
John Federick Zwerneman (internal medicine)
Phoenix Integrated Surgical Residency
Barry Mitchell Renz (surgery)
Tucson: University of Arizona Affil. Hospitals
John David Buckwalter (anesthesiology)

CALIFORNIA

Fairfield: David Grant USAF Medical Center
Joe Stephen Jones (ob/gyn)
Sacramento: University of California (Davis) Affil. Hospitals
Karen Louise Winn (internal medicine)
San Francisco: Kaiser Foundation Hospital
Dorothy Leslie Hassler (pediatrics)
Thomas Leroy Johnson Jr. (urology)
Mount Zion Hospital & Medical Center
Stephanie Rae Bennett (pediatrics)
St. Marys Hospital
Robert George Wagner (internal medicine)
University of California Hospitals
Jean Constance Hayward (pediatrics)
Wade Hampton King (surgery)
David Andrew Tate (internal medicine)
Sepulveda: UCLA San Fernando Valley Program
James Harmon Peace Jr. (internal medicine)

COLORADO

Denver: University of Colorado Affiliated Hospitals
Bonnie Belinda McCafferty (internal medicine)

CONNECTICUT

Hartford: Hartford Hospital
Joseph Lindsay Albright Jr. (flexible)
New Haven: Yale-New Haven Medical Center
Catherine Chiles (psychiatry)

DELAWARE

Wilmington: Wilmington Medical Center
Paul F. Nicholasen Jr. (internal medicine)

FLORIDA

Gainesville: William A. Shands Hospital & Clinics
Dennis Nelson Casey (radiology)
Alton Lee Melton Jr. (pediatrics)
Teresa Grace Truitt (ob/gyn)
Tallahassee: Tallahassee Memorial Regional Medical Center
Nancy Louise Tove (family medicine)
Tampa: University of South Florida Affil. Hospitals
Jackie Alan Lucas (ob/gyn)

GEORGIA

Atlanta: Emory University Affil. Hospitals
Gerald Thomas Gowitt (pathology)
Georgia Baptist Hospital
John Carroll Wiggins III (flexible)
Grady Memorial Hospital
Paulette Keith Ingram (pediatrics)
School of Medicine — Morehouse College Program
Mark Lewis Fields (family medicine)
Augusta: Eugene Talmadge Memorial Hospital
John Stuart Gaul III (orthopedic surgery)
Savannah: Memorial Medical Center
Manning Miles Goldsmith (surgery)
David Willis McMurry (internal medicine)

IOWA

Iowa City: University of Iowa Hospitals
John Jay Hugus (orthopedic surgery)

KENTUCKY

Lexington: University of Kentucky Medical Center
Peter Holbrook Bradshaw (surgery)
Herbert Royal Clark (surgery)
Olin MacKay Fox (internal medicine)
Michael Noah Tate (internal medicine)

MARYLAND

Baltimore: Baltimore City Hospitals
Mary Teresa Korytkowski (internal medicine)
Franklin Square Hospital
Robert Francis Devereaux (family medicine)
Union Memorial Hospital
Stanley A. Wilkins Jr. (surgery)
University of Maryland Hospital
Howard Dean McClamrock (ob/gyn)

MICHIGAN

Detroit: Wayne State University Affil. Hospitals
Florice Graham Blackmon (radiology)
Grand Rapids: Butterworth Hospital
Steven George Justus (flexible)
Marquette: Upper Peninsula Medical Education Program
Virginia Ellen Killough (family medicine)

MINNESOTA

Minneapolis: University of Minnesota Affil. Hospitals
Fred Henry Wilson (family medicine)
University of Minnesota Hospitals
Lawrence Mark Fleishman (internal medicine)
Jennifer Carol Schaal (ob/gyn)
University of Minnesota Hospital & Clinics
Louisa Elaine Chapman (internal medicine)

NEW MEXICO

Albuquerque: University of New Mexico Affil. Hospitals
Dean Alvin Madar (pathology)

NEW YORK

New York: Long Island Jewish Hospital
Paula Michele Kreitzer (pediatrics)
St. Lukes Hospital Center
Karen Palmore Beckerman (ob/gyn)
Rochester: University of Rochester Associated Hospital Programs
Dwight Morrison Williams (ob/gyn)
Stony Brook: SUNY at Stony Brook Affil. Hospitals
Terry Wayne Wallace (radiology)

NORTH CAROLINA

Asheville: Mountain Area Health Education Center
Nancy Rouser Freeman (family medicine)
Clay William Richardson (family medicine)
Charlotte: Charlotte Memorial Hospital
Jimmie Warren Adcock (internal medicine)
Ronnie Thurston Beamon (family medicine)
Joseph Lawrence Brady Jr. (pediatrics)
Bruce Vaiden Darden II (orthopedic/surgery)
Margaret Clay Huggins (ob/gyn)
Horace William Miller Jr. (surgery)
John Hamlin Rennick Jr. (family medicine)
Chapel Hill: North Carolina Memorial Hospital
Arnold Boyd Barefoot Jr. (ob/gyn)
Ira Eugene Bell III (radiology)
Nancy Custer Chescheir (ob/gyn)
Herbert Neal Collins Jr. (anesthesiology)
Steven Andrew Dingeldein (internal medicine)
Charles Johnson Fulp Jr. (surgery)
Thomas Wentworth Graham (psychiatry)
Mark Benjamin Hamner (psychiatry)
Nancy Sue Henley (internal medicine)
George Angelos Kallianos (radiology)
Vincent Joseph Kopp (anesthesiology)
Robert Paul Lutz (family medicine)
Robert Curtis McKoy (internal medicine)
Jonathan Ewdward Morris (psychiatry)
Myrlin Lee Murphy (psychiatry)
Donald Walter Peters (psychiatry)
Betsy Jane Phillips (internal medicine)
Glenn Ashley Withrow (family medicine)
Durham: Duke University Medical Center
Patsy Foster Daniels (family medicine)
Henry Alexander Easley III (ob/gyn)
David Scott Enterline (radiology)
James David Koren (family medicine)
Linville Monroe Meadows (internal medicine)
Dennis Ray Porter (psychiatry)
Anne Guerci Tyson (psychiatry)
Roger Charles Young (ob/gyn)
Greensboro: Moses H. Cone Memorial Hospital
Mary John Baxley (internal medicine)
Theodore Franklin Suggs (family medicine)
Greenville: Pitt County Memorial Hospital
Benjamin Gerald Hines Jr. (surgery)
Richard Harvey Mann (internal medicine)
Carl Daniel Pate Jr. (family medicine)
Carol Little Sena (internal medicine)
John William Tracy (family medicine)
Wilmington: New Hanover Memorial Hospital
Terry Lee Forrest (internal medicine)
David Wayne Lee (ob/gyn)
Barbara Ann Lowe (internal medicine)
Robert Lee Peterson Jr. (ob/gyn)
Winston-Salem: North Carolina Baptist Hospital
Stephen Marshall Hux (family medicine)
Barbara Anne King (family medicine)
Sara Tilton Willcox (pediatrics)

OHIO

Cleveland: Case Western Reserve Univ. Affil. Hospitals
Kathryn Louise Weise (pediatrics)
Cleveland Metropolitan General Hospital
Tommy Ray Harris (internal medicine)
Columbus: Grant Hospital
Wayne Everett Young (family medicine)

OREGON

Portland: Providence Hospital
Angela Kendrick Ross (internal medicine)
University of Oregon Hospital & Clinics
David Mac Eason (psychiatry)

PENNSYLVANIA

Philadelphia: Pennsylvania Hospital
Jean Gaye Hollowell (surgery)
Thomas Jefferson University Hospital
Beverly Nicholas Jones (psychiatry)
Washington: Washington Hospital
Stanley Spender Hamaker (family medicine)

SOUTH CAROLINA

Charleston: Medical Univ. of South Carolina Hospitals
Christine Lynn Carroll (pediatrics)
Rick Jay Cornella (internal medicine)
Katherine Lee Lenski (internal medicine)
Columbia: Richland Memorial Hospital
Robert Cedric Dellinger Jr. (family medicine)
Cindy Sue Dieringer (internal medicine)
Louis Valvelle Sutton III (family medicine)

TENNESSEE

Nashville: Vanderbilt Univ. Affil. Hospital
John David Dick (pediatrics)
Hal Dean Safrit (internal medicine)
Melissa Anne Will (pediatrics)

TEXAS

Galveston: Texas Medical Branch Hospital
John Carlisle Adams (radiology)
Houston: Baylor College of Medicine Affil. Hospitals
Iley Baker Browning III (pediatrics)
University of Texas Affil. Hospitals
Pamela Kay Smith (internal medicine)
San Antonio: Univ. of San Antonio Teaching Hospitals
Jeffrey Gordon Hoggard (internal medicine)
Wilford Hall USAF Medical Center
David Peter Ascher (pediatrics)
Reese Hunter Clark (pediatrics)
Rogers Glenn Howell II (pediatrics)

UTAH

Salt Lake City: University of Utah Affil. Hospitals
Stephen Carl Hartsell (internal medicine)
Donald Patrick Kadunce (internal medicine)
Marian Sue Kirkman (internal medicine)

VERMONT

Burlington: Medical Center Hospital of Vermont
Robert Arasi (internal medicine)

VIRGINIA

Charlottesville: University of Virginia Medical Center
Mary Helen Foster (internal medicine)
Timothy Owen Jenkins (radiology)
Marcus Eddie Randall (pathology)
Newport News: Riverside Hospital
Staley Cook Moore (family medicine)
Portsmouth: Naval Regional Medical Center
Mark Douglas Peacock (ob/gyn)
Richmond: Medical College of Virginia Hospital
Jean Elizabeth Aycock (ob/gyn)
Rildia Ann Jones (ob/gyn)
Robert Preston Lentz (pediatrics)
Roanoke: Roanoke Memorial Hospital
David Wayne Cash (family medicine)
Terence James Colpitts (flexible)
Thomas Macklin Moss (family medicine)

WASHINGTON

Seattle: University of Washington Affil. Hospitals
Martha Winifred Hahn (surgery)
James Terrill Massagee (anesthesiology)
Gregory Edward Simon (internal medicine)

WASHINGTON, D.C.

Walter Reed Army Medical Center
James Grier Wall (internal medicine)
Warren Lee Whitlock (internal medicine)

WEST VIRGINIA

Charleston: Charleston Area Medical Center
Richard Keith Calhoun (family medicine)
Dale Eric Green (internal medicine)

WISCONSIN

Madison: University Hospital and Clinics
Lawrence Northwood Bennett (radiology)
University of Wisconsin Affil. Hospitals
Constance Mary Kalinowski (psychiatry)
Marshfield: University of Wisconsin Affil. Hospitals
Dianne Lynn Zwicke (internal medicine)

1982 basic science grads

Anatomy: Emily Louise Christian and Michael Geary White.

Bacteriology and immunology: Joyce Kathleen Lammert, Patricia Audre Mickelsen and Claire Laurelis Moore.

Biochemistry and nutrition: Jeffrey Allen Alderman, James Larry Jameson III, Young-June Kim, Joan Sperrazza Pedersen, Steven Hugh Reynolds, David Andrew Ross, Claudia Libman Thompson and Julia Elizabeth Williams.

Pathology: Arthur Palfrey Bode and Bruce Hugh Dorman Jr.

Pharmacology: Morris Jefferson Clarke, Joseph Benfer Long and Paul Joseph Manberg.

Physiology: Greg Lawrence Harris, Paula Ruth Rogenes and Tony Gerald Waldrop.

Neurobiology: Gregory Nelson Ervin, Cynthia Jean Forehand, Johnny Ray Gilbert and Virginia Kathleen Shea.

Biomedical engineering and mathematics: James Samuel Bostick, Robert William O'Connor, Gary Lee Pellom and Randal Alan Zielsdorf.

Genetics: Barry David Greenberg, Ralph Clayton Harvey and Pamela Lee Reading.

1982 award winners

The Professor Award — Dr. Romulo Colindres

Basic Science Teaching Award — Dr. Lloyd R. Younce

CCB Excellence in Teaching Award — Dr. O. William Henson

Henry C. Fordham Award — Dr. Marcus E. Carr Jr. (M.D. '80)

Outstanding Intern Award — Dr. James L. Fry (M.D. '81)

Deborah C. Leary Award — Manning Miles Goldsmith (M.D. '82)

William deB. MacNider Award — Michael Lawrence Zollicoffer (M.D. '84)

Heusner Pupil Award — Patricia A. Johnson (M.D. '83) and Christopher G. Koeppl (M.D. '83)

Doctor of Medicine with Honors — Manning M. Goldsmith, Gerald Gowitt, James T. Massagee, Lin Meadows and Greg Simon

An assist from another center

Chalk another one up to team work at the University of North Carolina at Chapel Hill.

The staff of the skin bank in the North Carolina Jaycee Burn Center sought a way to improve the system for storing skin. They accomplished this goal with an assist from the tissue culture facility in the Cancer Research Center.

There are fewer than 20 skin banks in the nation and none has been around as long as 10 years. So the pioneers are still active and data are limited.

Becky Carnes, nurse clinician for the skin bank here, collected what information was available about storing skin and studied more general material on tissue preservation. Then she got some people in the tissue preservation business to help put the information to clinical use.

"She had done research on the viability of skin cells stored in different manners," said Jerald Cole, supervisor of the tissue culture facility. "She talked with Dr. Al Banes, a Ph.D. in the department of surgery, and he suggested she contact us."

Carnes, Banes and Cole "worked through the summer (of 1981) discussing what we wanted to use," Carnes said. "Jerald was able to help us know that the best way to store skin was an all around average medium."

"We found we could use a really common media that our facility makes regularly and add certain ingredients which support the skin cells," Cole said.

The one medium actually becomes three which are used at different stages.

The first medium is used when the skin is first collected. It contains a high level of antibiotics. "We do prep the area before removing the skin, but some contamination may remain," Carnes said.

After a couple of hours the skin is transferred to a richer solution which is "more of a growth medium," Cole said.

The skin remains in this medium for up to a week under refrigeration. After that it is frozen. A third medium has been specially formulated for that purpose.

Jerald Cole (left) and Gilbert Jen staff the tissue culture facility in the Cancer Research Center. The facility prepares 27 different media solutions used regularly for a variety of purposes in 135 labs at UNC-CH, in the Research Triangle Park and at Duke University. Last fall, the facility began preparing media for the N.C. Jaycee Burn Center's skin bank to use in storing skin.

"The third medium contains glycerol which protects the tissue by removing water from the cells," Carnes said. "Otherwise the water could freeze and burst the cells."

Cole said his facility prepares media for the burn center skin bank about once a month. "The prime time for media is six weeks. So preparing it once a month keeps it fresh."

Each time the media are prepared, they are tested for a week to 10 days. And even though the basic medium is one of the 27 the tissue culture facility prepares regularly, the staff prepares the skin bank's order separately.

"It's not that it should be different," Cole said, "but we want to make sure what we give the burn center is top quality."

The skin bank stores donated skin collected from cadavers as well as patients' own skin (autografts). Cadaver skin is used to protect large, open wounds until they are ready for grafting.

(Donating skin, Carnes noted, is just like donating other organs of the body. Skin is only removed from the torso and upper arms and legs. And only the thin, top layer of skin is removed. More information about skin donation may be obtained from the burn center.)

When a patient's own skin is removed for grafting, more may be collected than is needed immediately.

"Maybe some of the graft won't take at first, or more may be needed elsewhere. With the excess autograft available, we can put on additional grafts right in the burn unit, without further surgery," Carnes said.

The new media have been in use since last October. Previously, tissue in the skin bank had been stored in a saline solution which didn't harm the skin, but didn't help it either, Carnes explained.

The media formulated by Cole, Carnes and Banes may represent a trend in tissue preservation, and its use here is adding to the sketchy data available on the subject.

"We have done enough research to say this is better than the saline solution," Carnes said.

Cole added that the inter-center team is still working to find the optimal storage time for frozen cells and to improve procedures for storing tissues.

"We talk (about these matters) at least once a month," he said. □

Calendar

Medical alumni activities

September		
25	Co-Founders meeting	Chapel Hill
October		
29	Visiting Committee meeting	Chapel Hill
30	Medical Alumni Council fall meeting	Chapel Hill
1983		
March		
25	Visiting Committee meeting	Chapel Hill
25-26	Medical Alumni Weekend	Chapel Hill

Continuing education

August		
28-29	Practical Dermatology	The Hilton, Wilmington
September		
10-11	Intraocular Lens Implantation Workshop	Berryhill Hall
October		
1-2	Practical Approaches to Female Sexual Problems	Great Smokies Hilton, Asheville
2-3	Clinical Obstetrical Workshop	Carolina Inn
12-14	Practice Management Teaching Skills Workshop	Holiday Inn, Chapel Hill
15-16	Improving Team Effectiveness for the Academic Physician	Governor's Inn, Research Triangle Park
22-23	Fifteen Annual Malignant Disease Symposium: Cancer and Nutrition	Chapel Hill
November		
15-18	Departmental Residency Administration Workshop	Holiday Inn, Chapel Hill
19-20	Carolina Ocutome Workshop	Berryhill Hall
December		
3-4	The Modern Practice of Psychiatry: 1982	Berryhill Hall
4	Residents' Day in Ophthalmology	Berryhill Hall
1983		
January-February	First District Medical Society Postgraduate Course	TBA
January		
6	N.C. Neuro-ophthalmology Review	Berryhill Hall
19-21	Alcoholism: The Search for the Sources	Mission Valley Inn, Raleigh
February		
4-6	Nathan A. Womack Surgical Society	TBA
February-June	Internal Medicine Board Review Lecture Series	Berryhill Hall

Medical Alumni Bulletin
231 MacNider Hall 202A
Chapel Hill, N.C. 27514

Nonprofit Organization
U.S. Postage
PAID
Chapel Hill, N.C.
Permit No. 24

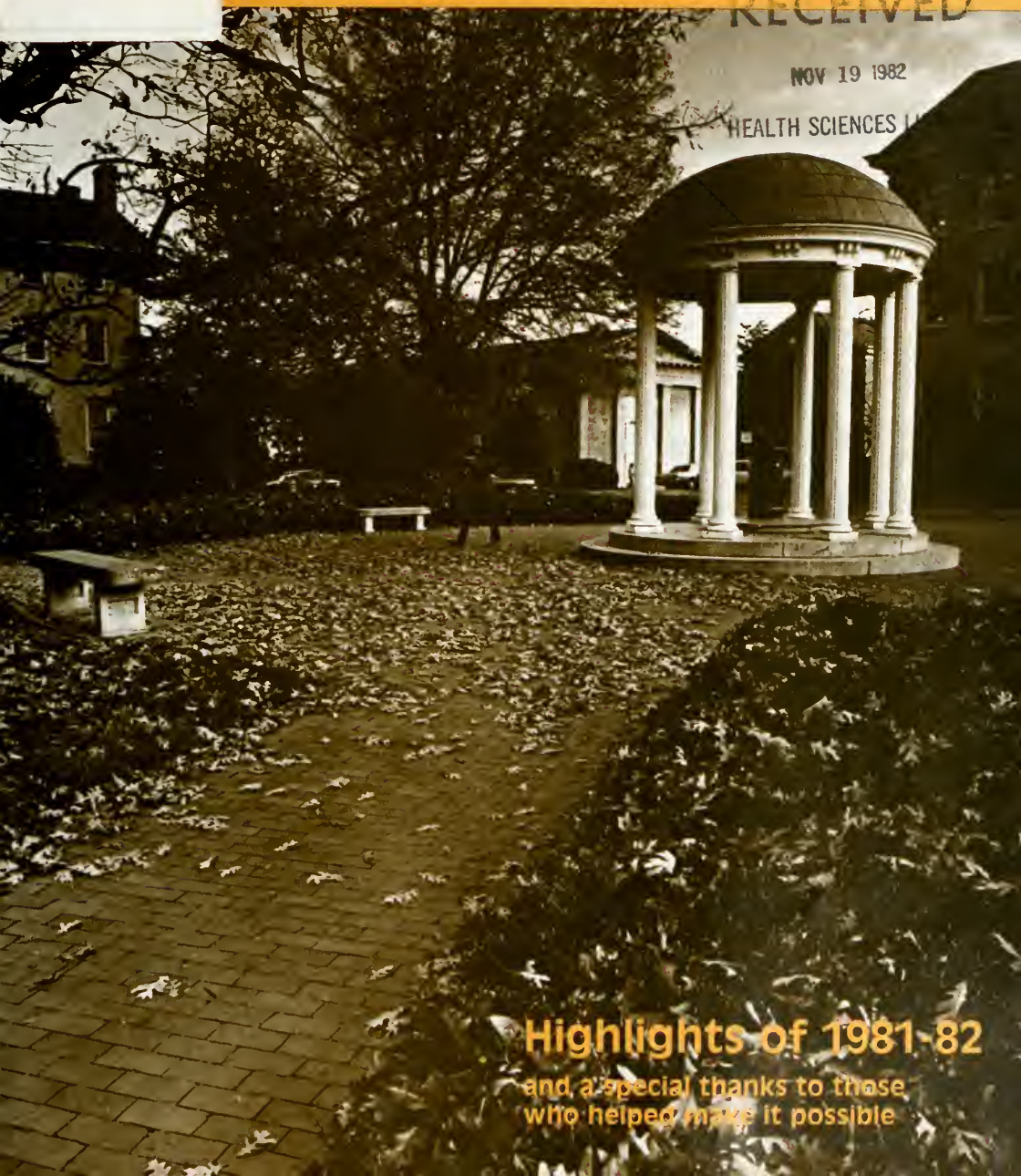
RECEIVED
AUG 16 1982
HEALTH SCIENCES LIBRARY

PERIODICALS DEPT
HEALTH SCIENCES LIBRARY 223H
CAMPUS

Medical Alumni Bulletin

VOLUME 28 FALL 1982 SCHOOL OF MEDICINE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL

RECEIVED
NOV 19 1982
HEALTH SCIENCES



Highlights of 1981-82

and a special thanks to those who helped make it possible

Medical Alumni Bulletin

ADVISORY BOARD
Gerald W. Fernald, M.D., '60
Thomas R. Griggs, M.D., '69
A. Myron Johnson, M.D.
George Johnson Jr., M.D. '50
Noel B. McDevitt, M.D., '64
Paul L. Munson, Ph.D.
William S. Pollitzer, Ph.D.
Chairman
Richard A. Boyd, M.D., '56
ex officio
Marvin M. McCall, M.D., '56
ex officio
John W. Stokes
ex officio
Shahane R. Taylor Jr., M.D., '59
ex officio

EDITOR
John W. Becton, M. Div.

DESIGN
Nancy Raasch

EXECUTIVE EDITOR
John W. Stokes,
Director, Medical Center
Public Affairs

The *Medical Alumni Bulletin* is published quarterly by the UNC-CH Medical Alumni Association, Chapel Hill, N.C. 27514. Postage is paid by the non-profit association through U.S. Postal Permit No. 24. All correspondence should be addressed to the editor at N.C. Memorial Hospital 204H, Chapel Hill, N.C. 27514.

Contents

Impressions remain after 33 years **2**
Highlights of 1981-82 ..... **7**
Individuals who helped make a difference **9**
Who's doing what **22**
Pearls of wisdom **24**

Behind the lines

A letter from Patricia Henritzy Bennett, wife of Truett V. Bennett, C. Med. '43-Dec., reminds us that while the late Dr. James Bullitt was named chairman of pathology and bacteriology in 1913, a separate department of bacteriology was established in 1929. Dr. Daniel Allen MacPherson, who had joined the faculty in 1923, was named chairman.

A statement in the spring 1982 Bulletin implied that Dr. Bullitt had served as chairman of both pathology and bacteriology until 1946. The Bennetts remembered that Dr. McPherson chaired bacteriology in the early 40s.

The facts were easily checked and herein set straight by referring to "Medical Education at Chapel Hill—The First Hundred Years," written by Drs. W. Reece Berryhill, William B. Blythe and Isaac H. Manning and published by the Medical Alumni Office in 1979.

If you missed getting a copy of this splendid book back during the centennial celebration, you'll be glad to know the Medical Alumni Office still has copies available. Write to 231 MacNider Hall 202H, Chapel Hill, N.C. 27514, or call (919) 962-2118, to order a copy.

Bill Blythe, C. Med. '51, assumed his historian's role again recently. He was invited by the Whitehead Society to present this year's Whitehead Lecture. Blythe took the opportunity to share with current medical students his recollections of his own student days.

Excerpts from Blythe's Whitehead Lecture are included in these pages and will no doubt evoke for many readers memories of their own. We think you also will appreciate the comparison between "then" and "now" as presented by an alumnus/faculty member.

More recent history is the subject of another article we feature in this issue. It's a summary of highlights of 1981-82 in the School of Medicine. Included in the highlights section is a grateful acknowledgment of all those whose financial support helped make the list of highlights lengthy.

We've noted the contributors to this year's quite successful Loyalty Fund drive, current members of the Co-Founders Club and contributors to special medical school projects.

A lot of people worked very hard to make sure these lists are accurate, but if errors or omissions have occurred, we apologize in advance.

A number of individuals who figure significantly in the history of the School of Medicine will be honored in special ways during Medical Alumni Weekend, March 25-26, 1983. Certain events related to these honors—in addition to the alumni seminar, class reunions and presentations of the distinguished faculty and distinguished service awards at the alumni banquet—promise to make this an especially significant weekend.

Full details will be released soon. Hope to see you there.

—JWB

Much has changed in 33 years

By William B. Blythe, M.D.
Class of '51

(The following was taken from the 1982 Whitehead Lecture, delivered Aug. 18, 1982, the first day of classes for the incoming first-year class. Dr. William B. Blythe is professor of medicine and chief of nephrology.)

Thirty-three years ago, I was a member of the entering freshman class of this medical school. There have been many changes in the place since then, but it is my thesis that the essence of the place has changed little—if at all—through the years.

My aim here shall be to try to transmit to the entering class my sense of what that essence is.

Our orientation was considerably briefer than yours. Perhaps there was less to be oriented to in those days, but I suspect that there are also other reasons to account for the difference in length.

We arrived at what was then simply referred to as The Medical School but what is now known as MacNider Hall. We arrived—with several notable exceptions—at 8:30 a.m. to create a good impression and to get off to a good start. *We* consisted of 52 white males, all but two of whom were North Carolinians. (Incidentally three of that group are now members of our department of medicine). The halls resounded with what, superficially, sounded like genuine merriment, but what in reality was simply loud nervous laughter, because we were sorely anxious as a consequence of frightening rumors that were rife.

The first thing that was apparent to me was that none of the professional premedical students was there. These were the people who always talked impressively about their accomplishments in organic chemistry and comparative anatomy, who always knew who had been admitted to the Harvard Medical School, and who could tell you the pitfalls of and the leg-ups to admission to our medical school. I was surprised, delighted—and reassured—that they weren't present. I wondered then, and I wonder now whatever happened to them.

After we filled out some forms in what was then the library of the medical school and what is now the dean's office, we moved up to the second floor for a session in what was then *the* medical school auditorium and what is now offices for the Medical Foundation and the Medical Alumni Association.

I don't remember exactly what was said at this meeting, but I do remember who the speakers were and I have a remembrance of the essence of what they said and—perhaps more importantly—how they said it.

Dr. Reece Berryhill, the dean and for whom the basic science building is named, led off. He told us in nonthreatening, but rather dour language, as was his custom what was expected of us and what we could expect of the faculty. I do remember that neither he nor anyone else that morning told us to look to our right and to our left and that one of us would be absent by the end of the year. I also remember that he didn't reassure us that all of us would be present. He told us simply and somberly what was going to happen and what we needed to do to remain a part of the scene.

There were two speakers who I suppose might be called inspirational speakers. The first was Dr. William de Berniere MacNider.

By the time our class entered medical school, Dr. MacNider had become an almost legendary figure. It was said of him by Chancellor Robert House that he was the most completely identified personality in mind and spirit with Chapel Hill and its environs and its people, and with the University of North Carolina, of any person with whom he had ever been associated. Dr. MacNider was reared in his mother's house on the spot where the downtown post office now stands. It is said that his mother's house was the congregating place of young and old, black and white, country people and town people. It was more than just a physical neighbor of the campus. It was the heart and center of the life of the place.

Dr. MacNider was a graduate of the University and received his medical degree from the University School of Medicine in Raleigh. He had been on the faculty since 1899, had been a full professor of pharmacology since 1905, and a Kenan professor since 1924. He had been dean of the medical school from 1937 to 1940. Because of his accomplishments in research, he had been elected to membership in many of the learned societies, including the National Academy of Sciences, The American Philosophical Society, and the American Academy of Arts and Sciences. For many years, he had practiced medicine in Chapel Hill while he was a member of the faculty of the medical school.

So you can see that he was rather the complete physician, a person who was imminently qualified to tell us how to succeed in medical school, to remind us of how difficult it was going to be, to warn us to get busy or we wouldn't last long in medical school.

But he didn't do any of these things.

Dr. MacNider told us of the joy and excitement in studying medicine and in being a physician. The words happy and thoughtful were favorites of his and he used them frequently. He told us of many of his experiences as an investigator, as a teacher and as a practicing physician.

but not the essence

We sensed that we were being welcomed into a priesthood, were being accepted as colleagues by a grand old man, who himself was terribly excited—and even wistful—about what lay ahead for *us*.

So, Dr. MacNider excited us, because he, himself was excited. He did not frighten us because he saw no need to do so.

There's one other thing that I have remembered about Dr. MacNider's little talk to us that morning. It was informal, relaxed, as if he were talking within his home.

This is epitomized by something that happened during his talk. He was well into his talk when Dr. Hubert Royster, who had been dean of the medical branch at Raleigh, entered the room.

As soon as Dr. MacNider saw him, he said "Hey-o here, Hubert," and Dr. Royster responded with "tolerably well, Billy, how are you?"

At which point, Dr. MacNider stopped his talk to us, and he and Dr. Royster carried on a five-minute conversation in which they each inquired into the health of family members, colleagues, friends and their vegetable and flower gardens.

When they were through, they both apologized, and Dr. MacNider returned to his talk. By now, our class was not only excited about what lay ahead, but were reassured that the faculty just might be real human beings.

The next speaker was—and is—one of the best teachers that I have ever had, Dr. Charles Hooker. Dr. Hooker had just come onto the faculty of the medical school as a young, energetic, imaginative chairman of the department of anatomy.

He had been at Yale and, for a short time, Emory, before coming to Chapel Hill. He was known not only for his teaching ability, but also, and more so, for the outstanding work he was doing in an area that nowadays would be called reproductive biology.

He had with him a cage full of white mice. I don't remember what Dr. Hooker said about the mice. It had something to do with his research. What I do remember—and vividly—is the air of excitement that he created for our class. The excitement came from Dr. Hooker's total fascination with, and deep appreciation of the known and the unknown in biology and his willingness—his need—to share the excitement with others.

It would have been, and still is totally foreign to his nature even to entertain the idea that he would need to admonish medical students or to threaten them.

Rather he treated us as younger colleagues who could and would ask some questions that he had never thought of. I can tell you that we asked him plenty that he had heard many times, but he always responded enthusiastically as if he had never heard the question before. Now that I have gotten older, I realize that the good teacher never hears an old and stale question.

So what was the effect on us of that orientation that morning 33 years ago?

Dr. Blythe

First of all, I think we left the session with one impression that we had when we came there and that was that we must work hard, that there was much to be done which would require long hours of study and thinking. There was no way of escaping this reality.

We also left with impressions that either we had not come there with or which had been rather ill-formed or nascent.

We became quickly caught up in a spirit of inquiry that seemed to pervade the place that morning, a spirit of inquiry which clearly afforded an old man a source of enthusiasm and quiet satisfaction and filled a younger man with unabashed zeal.

Although we were faced with much hard work ahead of us, the excitement and satisfaction exhibited by the faculty, as illustrated by the speakers, overshadowed this fact and filled us with anticipation.

Accepted as colleagues

At least three other things impressed us. The first was that it appeared to us that we were accepted as colleagues, younger but nevertheless full-fledged colleagues.

The second was that an air of informality seemed to permeate the school. Certainly, there was no evidence that day of sloppiness or even studied casualness. Rather, there was a lack of stiffness, and an easy interchange of conversation seemed to predominate. And finally, one got the notion that there was a notable absence of stuffed shirts. No one, as far as we could tell, felt the need to impress us in the least.

Now, I have been here most of the time since then. I spent two years at another medical school since I was in the last two-year class; I spent two years away in the Army Medical Corps, and I spent some time away on a sabbatical leave. With those exceptions, I have been here ever since. According to some of my colleagues, this has caused me to be parochial and not able to recognize excellence. That may be the case, but I don't believe it. I believe that it might better enable me to recognize change and to make some determination of the effect of changes. And changes have certainly occurred.

The most obvious change has been the enormous growth of the place.

The UNC-CH medical center 30 years ago. Today, this same area contains approximately twice as many buildings.

Not only are there many more buildings, there are many more people. As I said earlier, my class consisted of 52, and since there were only two classes, the entire student body was about 2/3 the size of one of today's classes. The student body nowadays is around 680 students. The faculty of my department, the department of medicine, is more than three times the size of the entire faculty of 1949. And then there are housestaff, nurses, people working in the hospital and on and on and on. The place is therefore much more impersonal.

Not only are there many, many more people around, there are, fortunately, more different kinds of people. My class consisted of 52 white males more or less from the same sort of background and with more or less the same sort of academic preparations, and having studied more or less the same courses.

Today's classes have more women and more students from minority groups. Class members have studied at more colleges and have pursued more varied courses of study, including some who have advanced degrees.

This marked heterogeneity stirs up enormous challenges for students and faculty, but it also provides tremendous opportunities for students to learn more from each other, and for us, the faculty, to learn more things from students.

Another change that has taken place that challenges all of us has been the construction of the building where students spend most of their time over the first two years. This building was constructed with two major tenets in mind. The first was that with a tremendous increase in class size, the existing classrooms and laboratories were simply not large enough, and the second was that space could be saved and students would be given some space of their own if they were placed in one area and the faculty came to them rather than the other way around.

When I was in medical school the physiology lecture halls and laboratories were in the physiology department,

This photo from the 1940s shows Dr. MacNider in his lab in the building that now bears his name.

and the pathology lecture halls, laboratories and morgue were in the pathology department and so on.

Why is this important? It is because it allowed much more contact between students and faculty. We could carry on extensive hallway and office conversations in off-hours and at night. We learned a tremendous amount in this way, not only about our classroom work but about such varied things as the research work of a faculty member or which big-league baseball team he supported. The point is that we got to know the faculty and the faculty us.

Today, students rarely get to know a faculty member that well and equally rarely do we come to know individual students well.

There is yet one other difference that I think is important and that is the increased demand on, and the splintering of the faculty's time.

For example, in my judgment research is more demanding these days. It is certainly more difficult and time consuming to obtain research funds and to keep them. Part of this represents increasing competition for the same amount of money and part an increase in bureaucratic maneuvers designed to make the researcher more accountable, and the actual work is probably *as* time consuming. In my own judgment, the degree of frenzy that is demanded these days is not healthy.

The practice of medicine is also more time-consuming—time-consuming to keep up and maintain one's skills and appropriate knowledge and time-consuming in sharing that lore with house officers, medical students, and practicing physicians all over North Carolina and beyond.

So, what have these changes done to the essence of the place? Has it been destroyed never to return? Are things irrevocably different now or are the essentials different at all?

I'll tell you—and enthusiastically—that the essence has not changed.

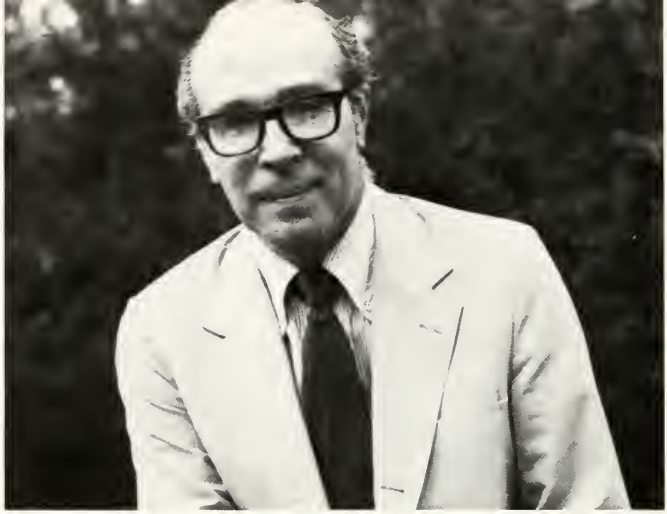
Both the older and the younger faculty members still possess the spirit of inquiry in the finest manner. The academy is very much alive. The joy of learning continues to abound.

The school is still a friendly, non-assuming place. This means that students are neither shaped into a mold in which all are expected to enter the general practice of medicine, nor are they stamped with a stamp that says that they are superior and bound for research and such.

Rather we hope that students will achieve all they can and want to achieve, to become even more educated, liberal in the best sense of the word, and empathetic with the unfortunate whoever and wherever they are. We, the faculty accept it as our responsibility to help them do this.

I believe most emphatically that the school continues to live by the state motto, *esse quam videri*, "To be rather than to seem." □

Dean's Page



We enter the 1982-83 medical school year with an extraordinary mixture of great promise and great challenge. The promise stems in part from the immense energy and potential of the 160 dedicated and able students of the class of 1986 who now share with alumni that unique experience of the first day in medical school; it stems in part from the distinguished new leadership of three major clinical departments, Dr. David Ontjes, chair of the department of medicine, Dr. Thomas Boat, chair of the department of pediatrics, and Dr. William Droegemueller, chair of the department of obstetrics and gynecology, all of whom have assumed their positions in recent months; it stems in part from a vigorous and dedicated faculty of outstanding ability, and it stems in part from the momentum provided by the great traditions of our school, a legacy from all who have been associated with it in the past.

Our challenges, too, are manifold: Through research we must advance the potential effectiveness of health care and we must incorporate these advances into our teaching and practice in the face of increasingly limited resources; our teaching must cover the span from the first year of medical school, graduate school and our undergraduate programs through programs which meet the CME needs of the mature and sophisticated clinician. It must include a solid base in sciences, humanism and clinical practice; our programs of patient care must range from primary care through tertiary or even "quarternary" care and they must be of the highest order of quality while integral to the teaching mission of the school. These are among the substantial challenges. But perhaps the greatest challenge lies in the need to think ahead realistically, to conceive of the appropriate roles and functions of the school and its graduates in the future. The class of 1986 will make most of their professional contributions in the 21st century and most of them will still be practicing after the year 2020. How can we now best equip them for that future?

To develop a partial answer, we now have under way an extensive review of the curriculum of the School of Medicine. During its fall meeting, the visiting committee of the Medical Alumni Association worked closely with the curriculum review to provide insight from alumni in the process. Students and faculty are also extensively involved.

In addition, as the review of the curriculum is completed, we will begin a more comprehensive examination of the future role and functions of the school. I look forward to the involvement of the alumni in that important process.

Stuart Bondurant

It was a very good year

The establishment of a major scientific program, the opening of state-of-the-art patient care facilities, significant progress in medical research, the continuing review of the medical curriculum and a number of honors bestowed on members of the faculty are among the highlights of 1981-82 in the School of Medicine.

The Program in Molecular Biology and Biotechnology was announced by Dr. Stuart Bondurant, dean of the medical school, who said the new program should amplify the efforts of scientists in various University departments to extend the uses of genetic technology. Dr. Marshall H. Edgell, professor of bacteriology and immunology, was named director.

The National Institutes of Health selected UNC-CH to establish and maintain the nation's newest Multipurpose Arthritis Center. Dr. John B. Winfield, professor of medicine and chief of the division of rheumatology and immunology, will serve as director of the center.

Construction began in December 1981 on the Lineberger Cancer Research Center building and a formal groundbreaking ceremony was held April 15. The building is scheduled for completion in 1984.

New perinatal care facilities in North Carolina Memorial Hospital opened Sept. 16, 1981. The facilities, among the best in the world, can comfortably accommodate more than 3,000 deliveries annually.

The Day Op program moved into a spacious new suite Feb. 16. Formal dedication was held June 4-5. Also opened during this year was a new neurosurgical intensive care unit.

Brain tumor patients were given interferon for the first time in the United States in a clinical trail begun this summer at the School of Medicine.

N.C. Memorial's Trauma Center was designated as a site to test a new type of "artificial blood," a chemical

Suberr Liu Chi (right) was the first infant born in the new perinatal care facilities at N.C. Memorial. His father, George Chi is a statistician with the UNC-CH Highway Safety Research Center. His mother, Shelly Chi, is formerly assistant professor of biostatistics in the School of Public Health.

A spacious new suite for day-op surgery was activated last February.

compound distributed under the brand name Fluosol-DA.

Physicians in the Cancer Research Center developed a treatment—high dose Ara C-asparaginase—that more than triples the remission rate for patients with acute myeloctic leukemia.

Medical school researchers discovered additional evidence that there may be a genetic trait that can forecast which young people are likely to develop high blood pressure as adults. The studies were directed by Dr. James W. Woods Jr., professor of medicine.

Dr. Michael R. Swift, professor of medicine, and his colleagues developed a technique that is helping explain why certain common disorders, such as heart disease and cancer, occur more often in some families than others. The technique involves identifying genes and demonstrating that they are involved in predisposing people to common disease.

Four members of the medical school faculty were elected fellows of the American Association for the Advancement of Science. They are University Chancellor Christopher C. Fordham III ('49), professor of medicine and social and administrative medicine; Dr. Stuart Bondurant, dean and professor of medicine; Dr. Carl W. Gottschalk, Kenan professor of medicine and physiology; and Dr. Cecil Sheps, Taylor Grandy distinguished professor of social and administrative medicine and professor of family medicine.

Dr. Mary Ellen Jones, Kenan professor and chair of biochemistry and nutrition and Dr. Raymond P. White Jr., associate dean and professor of oral surgery, were elected members of the National Academy of Sciences' Institute of Medicine. Jones also received the Wilbur Lucius Cross Medal of the Yale Graduate Association.

Faculty honors

Dr. Ernest Craige, Henry A. Foscue distinguished professor of cardiology, received the 1982 Gifted Teacher Award of the American College of Cardiology.

Dr. Colin G. Thomas Jr., professor and chair of surgery, received one of four Distinguished Service Awards presented by the University of Chicago Medical Alumni Association.

Several faculty members were elected to head various professional organizations.

Dr. Clayton E. Wheeler Jr., professor and chair of dermatology, was elected president of the American Dermatological Association for 1982-83.

Dr. William McLendon ('56), professor of pathology and chairman of hospital laboratories at N.C. Memorial, served as president of the national Academy of Clinical Laboratory Physicians and Scientists.

Dr. James F. Donohue, assistant professor of medicine, assumed office as president of the North Carolina Thoracic Society Medical Section of the American Lung Association.

Dr. Tai-Chang Peng, associate professor of pharmacology, was named president-elect of the Sigma Xi scientific research society's local chapter.

Dr. Ernest W. Small, professor of surgery and chairman of oral surgery in the School of Dentistry, was named to serve on an expert advisory panel of the United States Pharmacopeial Convention.

Two faculty members received American Heart Association established investigatorship awards: Dr. John J. Lemasters, associate professor

of anatomy; and Dr. David E. Millhorn, instructor in physiology.

The Arthritis Foundation similarly honored two members of the division of rheumatology and immunology. Dr. Simon L. Newman, research assistant professor of medicine, and Dr. Philip Cohen, assistant professor of medicine, received investigator awards and grants to further their arthritis research.

The Area Health Education Centers program received a Wyeth Traveling Fellowship for the seventh year. It would allow Dr. Richard F. Walton, professor of family medicine, to visit the United Kingdom and a physician from the United Kingdom to visit North Carolina. Earlier in the academic year, Dr. Peter Ungaro, associate professor of medicine, exchanged visits with Dr. John Wagstaff of England, under the auspices of the AHEC's sixth Wyeth Traveling Fellowship.

The expertise of AHEC's director, Dr. Eugene S. Mayer, was called on by the Program on Access to Health Care. He was named to a task force activated to examine the nursing shortage in North Carolina.

Special recognition

Three faculty members received special honors from the UNC-CH medical school family.

Dr. James F. "Turk" Newsome ('47), professor of medicine, received the Medical Alumni Association's Distinguished Faculty Award.

Dr. Augustus T. Miller Jr. ('50), professor of physiology, was one of seven recipients of the School of Medicine's Distinguished Service Award.

Members of the pharmacology department honored Dr. Thomas C. Butler, professor emeritus and past chair of the department, by establishing a scholarship in his name. The scholarship will be awarded to students in the M.D.-Ph.D. program, a track Butler has long advocated for physician-scientists.

Two other scholarships were endowed and the first recipients were chosen for another scholarship program.

Many loyal individuals helped make it such a good year

Contributions to the Loyalty Fund topped $30,000 in 1981-82, and special projects of the classes of '39 and '72 drew more than $15,000 of additional support.

1981-82 was the first full year of consolidated giving through Carolina Annual Giving (CAG). The School of Medicine also received some $8,300 in designated gifts through CAG, over and above unrestricted Loyalty Fund contributions and special class project support.

Many medical alumni and friends also support the School of Medicine through the Co-Founders' Club and special projects of the Medical Foundation.

All such gifts provide financial flexibility in meeting special or unforeseen needs of the school.

The Loyalty Fund is the sole means of support for the Medical Alumni Association. All those who graduate from the School of Medicine with medical, basic science or allied health degrees; former house officers and medical faculty members automatically become Medical Alumni Association members for life. By charter, the association charges no dues.

Medical Alumni Association activities made possible by the Loyalty Fund include student programs, student scholarships, the Medical Alumni Bulletin and Alumni Times, and alumni activities such as Medical Alumni Weekend.

The Co-Founders' Club has provided leadership in securing funds for the Lineberger Cancer Research Center building and the North Carolina Jaycee Burn Center. Other projects of the Co-Founders' Club and the Medical Foundation include a number of endowed professorships, student scholarship funds, support for specialized clinical research and unrestricted endowments.

The 1982-83 Loyalty Fund drive is under way, and now is a good time to make year-end gifts, says Dr. William B. Wood ('56), director of medical alumni affairs.

"We are pleased that some 10 percent of our medical alumni actively support the School of Medicine with their financial contributions," Wood said. "We hope to increase this percentage even further this year. The percentage of alumni who contribute to the school is a significant factor to many other potential supporters, both individuals and corporations.

"Contributions, which are of course tax deductible, should be sent payable to Carolina Annual Giving so that you can receive credit in the University-wide Honor Roll," Wood reminds alumni and friends. "It is very important to remember to designate what portion of your CAG gift is for the Loyalty Fund or other specified medical school project."

The Co-Founders' Club is a donor organization whose members contribute at least $1,000 to the School of Medicine each year. Those interested in the Co-Founders' Club may contact the Medical Foundation of North Carolina, 229 MacNider Hall 2021l, Chapel Hill, N.C. 27514, (919) 966-1201.

Those who supported the School of Medicine during 1981-82 through the Loyalty Fund, the Co-Founders' Club and special contributions are listed on the following pages. Every effort was made to ensure accuracy, but if errors or omissions have occurred, the editors apologize in advance.

New department chairs in the School of Medicine are (from left) Dr. David A. Ontjes, medicine; Dr. Thomas F. Boat, pediatrics; and Dr. William Droegemueller, obstetrics and gynecology. The three physicians were formally introduced to the faculty at a reception held in their honor in September at the Morehead Planetarium. Ontjes has been a member of the UNC-CH faculty since 1969. Boat came to Chapel Hill from Case Western Reserve University, and Droegemueller previously was associate head of obstetrics and gynecology at the Arizona Health Science Center in Tuscon.

Members of the medical school class of 1972 contributed $15,000 during Medical Alumni Weekend and pledged to double that amount to fund the Class of '72 scholarships to be awarded on the basis of need.

Representatives of the Sigmund Sternberger Foundation of Greensboro presented the dean with $25,000 toward a pledge of $50,000 to endow the Sigmund Sternberger scholarships. The foundation has funded the scholarships on an annual basis since 1970. The scholarships are awarded to North Carolina students with a genuine interest in practicing in the state.

The first three Holderness Fellows were selected. This fellowship program was established by the Howard Holderness family of Greensboro to support research and other scholarly work of outstanding students.

Students excel

As national attention was focused on the problem of delinquency in repaying federal loans by former medical students, it was noted that UNC-CH medical students have a loan repayment rate which is significantly better than the national average.

Both undergraduate and graduate medical students distinguished themselves academically, as evidenced by these examples:

- Approximately four of five UNC-CH medical students participating in this year's National Residency Matching Program were placed in the program of their first or second choice, including 59 percent who were matched with their first choice.
- As a group, department of medicine residents taking the American Board of Internal Medicine certifying exam did better than 95 percent of all residents who took the exam across the nation. Three of the UNC-CH residents scored in the 99th percentile, the highest score possible for this exam.
- Orthopedics residents as a group scored in the 96th percentile on the National Orthopaedic In-Training Examination. One scored in the 100th percentile and another in the 99th percentile.

New department heads named

Two new department chairs were appointed during 1981-82, several were reappointed, and search committees continued to seek to fill two vacant chairs.

Dr. William Droegemueller, former professor and associate head of the department of obstetrics and gynecology at the Arizona Health Sciences Center in Tuscon, was named chair of the department of obstetrics and gynecology here.

Dr. David A. Ontjes was named chair of the department of medicine. A member of the faculty since 1969, Ontjes had served as acting chair since last summer. Ontjes also was named Eunice Bernhard distinguished professor of medicine.

Dr. Kenneth Sugioka announced his intention to step down from the chair of anesthesiology at the end of the fiscal year. Dr. Kenneth Levin was named to serve as acting chair and a search committee began seeking a permanent chair.

The pediatrics chair search committee was completing its responsibilities at the year's end, leading to the appointment of Dr. Thomas F. Boat.

Other new appointments included: Dr. Raymond P. White Jr., associate dean; Dr. George Johnson ('50), assistant to the office of the dean; Dr. Richard N. Johnson, director of the curriculum in biome-

dical mathematics and engineering; Everett Nordstrom, executive director of the Medical Foundation; Dr. Suzanne V. Sauter ('74), medical director of the rehabilitation program office; and Dr. Barbara Hulka, professor of epidemiology in the School of Public Health, head of the Cancer Research Center's epidemiology program.

Chairs and directors reappointed were: Dr. J. B. Graham ('40), genetics curriculum; Dr. Charles R. Hackenbrock, anatomy; Dr. James N. Hayward, neurology; Dr. John P. Perkins, pharmacology; Dr. Edward R. Perl, physiology, and I. Glenn Wilson, social and administrative medicine.

Distinguished guests

Two Nobel laureates were among the distinguished visitors to the medical school this year. Dr. Frederick C. Robbins (1954 Nobel Prize in Physiology and Medicine), delivered the Merrimon Lecture in the fall. Dr. Paul Berg (1980 Nobel Award in Chemistry) gave a Cancer Research Center seminar in April.

Other visitors included Dr. Walter J. Humphries, a Wellcome Visiting Professor in the Basic Sciences; Dr. Lonnie R. Bristow, president of the American Society of Internal Medicine; Dr. Alvin F. Poussaint of Harvard Medical School, who delivered the Lawrence Zollicoffer Lecture; and Dr. George E. Block, a Charles E. Culpepper Visiting Professor.

Among the research grants awarded to the School of Medicine during 1981-82 were: a $2.9 million Specialized Center of Research grant awarded to the Center for Thrombosis and Hemostasis by the National Heart, Lung and Blood Institute, and $719,247 to the Cancer Research Center in a renewal of its support grant from the National Cancer Institute.

Also, the Radio Corporation of American donated about $70,000 worth of equipment to the micro-electronics lab.

The Loyalty Fund

Contributors to the Loyalty Fund provide support for student aid, research projects, special needs of the dean's office and alumni programs. Those who contributed to the Loyalty Fund during 1981-82 are listed below. Also listed are alumni and friends who have contributed to special class projects and who have made designated gifts to the School of Medicine.

Class of 1917

R. G. Wilson, Edisto Island, S.C.

Class of 1918

Russell O. Lyday, Greensboro

Class of 1919

Kenneth B. Geddie, High Point

Class of 1921

D. G. Caldwell, Concord

Class of 1922

J. L. Winstead, Greenville

Class of 1924

John W. Ormand, Monroe

Class of 1925

John H. Hunt, Cincinnati
J. Donald MacRae, Dunedin, Fla.
James H. Wall, White Plains, N.Y.

Class of 1927

John S. Rhodes, Raleigh

Class of 1928

James F. Crumpler, Rocky Mount
Zack D. Owens, Elizabeth City
Charles W. Robinson, Charlotte

Class of 1929

Vance T. Alexander, Ridgewood, N.J.
David A. Young, Raleigh

Class of 1931

James M. Alexander, Charlotte
Ralph B. Garrison, Hamlet
Jean C. McAlister, Greensboro
Lewis M. McKee, Durham
J. Allen Whitaker, Rocky Mount

Class of 1932

David L. Avner, Greensboro, Pa.
Jefferson Davis, Myrtle Beach
Howard Q. L. Little, Gibsonville
Dermot Lohr, Lexington
Curtis G. Southard, Bethesda
Robert E. Stone, Evanston, Ill.
Thomas J. Taylor, Roanoke Rapids

Class of 1933

Joseph R. Strauss, Port Washington, N.Y.

Class of 1934

June U. Gunter, Durham
Willis B. Mitchell, Hendersonville
Carl Pigman, Whitesburg, Ky.
Thomas C. Worth, Raleigh

Class of 1935

Thomas A. Henson, Greensboro
Julien H. Meyer, Roanoke
Hubert C. Patterson, Chapel Hill

Class of 1936

Sherwood W. Barefoot, Greensboro
Leo Esbin, Wantagh Long Island, N.Y.
Otto S. Steinreich, Akron
Laura Ross-Venning, Charlotte

Class of 1937

Elizabeth J. Dotterer, Sanford
Charles W. Sensenbach, Knoxville

Class of 1938

Olivia Abernethy, Greensboro
Thomas W. Crowell, Bellingham, Wash.

Class of 1939

(see also Special Projects, below)

Jesse B. Caldwell Jr., Gastonia
Charles E. Cloninger, Conover

Class of 1940

Phil L. Barringer, Monroe
Inez Willoughby Elrod, Huntersville
Henry C. Guynes Jr., Rockwall, Texas
French H. McCain, Birmingham, Mich.
John L. Ranson Jr., Charlotte

Class of 1941

James W. McLean, Fayetteville
Frederick L. Tunick, Neponsit, N.Y.

Class of 1942

Jerry H. Allen, Springfield, Mo.
O. Watts Booth, Newport News
Louis D. Hayman Jr., Jacksonville
William E. Hoy Jr., Ashland, Ky.
John H. Miller, Bartow, Fla.
James D. Piver, Jacksonville

Class of 1943 March

Julian T. Brantley, Greensboro
David S. Citron, Matthews
William N. Hubbard Jr., Kalamazoo
George L. Jordan Jr., Houston
Alexander C. Mitchell, Frenchtown, N.J.
John H. Reed, Gainesville, Ga.

Class of 1943 December

Hilda H. Bailey, Salisbury
Joseph R. Blair, Edgewood, Md.
Lloyd B. Harrison Jr., Wilmington, Del.
William H. Meroney III, Portsmouth, R.I.
Henry C. Newsome Jr., Pilot Mountain
S. Malone Parham, Henderson
Herbert W. Park III, Richmond

Class of 1944

J. Vincent Arey, Concord
Earl E. Correll, Kannapolis
Isaac V. Manley, Raleigh
Charles A. Speas Phillips, Pinehurst
Margaret C. Swanton, Clinton
Charles W. Tillett Jr., Charlotte
Edwin J. Wells Jr., Wilmington

Class of 1945

G. Walker Blair Jr., Burlington
J. Hicks Corey Jr., Chattanooga
Harold L. Godwin, Fayetteville
James E. Ribet, Asheville
Dean F. Winn Jr., Woodland, Calif.

Class of 1946

Walter C. Barnes Jr., Texarkana, Texas
Robert V. Dutton, Houston
George W. Farris, Stuart, Fla.
Robert S. Lackey, Charlotte
William G. Sanford, Winston-Salem
H. Frank Starr Jr., Greensboro
Allen Tate Jr., Burlington
John E. Weyher, Goldsboro
Thomas E. Whitaker II, Greenville, S.C.

Class of 1947

C. Roy Rowe Jr., Statesville

Class of 1948

W. Ernest Powell, Mars Hill

Class of 1949

F. Sidney Gardner Jr., Fayetteville
Robert A. Griffin, Asheville
Rose Pully, Kinston
Aubrey D. Richardson, Baltimore

Class of 1950

Frederick O. Bowman Jr., Riverdale, N.Y.
Gordon R. Heath, Lakeland, Fla.
John A. Kirkland, Wilson
John L. McCain, Wilson
J. Olin Perritt Jr., Wilmington

Class of 1951

William B. Blythe II, Chapel Hill
Octavius B. Bonner Jr., Daytona Beach
S. Vance Huffman, Elon College
Claude A. Smith, Winston-Salem
Jack W. Wilkerson, Greenville

Class of 1952

Charles H. Powell, S. Daytona

Class of 1954

Paul H Brigman, Trinity
George W. Brown, Waynesville
J. Franklin Graves, Mt. Pleasant, S.C.
Ely J. Perry Jr., Kinston
H. Durwood Tyndall, Goldsboro
Edward S. Williams Jr., Durham

Class of 1955

Julian S. Albergotti Jr., Charlotte
Ralph E. Brooks Jr., High Point
J. Eugene Glenn, Jacksonville, Fla.
Ira D. Godwin, Fairfax
William L. London IV, Durham
Thomas P. Moore, Jacksonville
Oliver F. Roddey Jr., Charlotte
Palmer F. Shelburne, Greensboro
Henry L. Stephenson Jr., Washington
Robert L. Summerlin Jr., Dublin
G. Reginald Tucker Jr., Henderson

Class of 1956

John R. Baggett III, New Bern
Richard A. Boyd Jr., Statesville
Lee A. Clark Jr., Wilson
John T. Evans, Chattanooga
Charles W. Fowler III, Orlando
William R. Harris, Hickory
H. Neill Lee Jr., Lumberton
Otis M. Lowry, Spring Hope
James D. Medders, Louisburg
Robert L. Murray, Roanoke
William B. Wood, Chapel Hill

Class of 1957

Robert S. Cline, Sanford
Eric L. Fearrington, Greenville
James W. Fresh, Sardis, Ga.
H. Maxwell Morrison Jr., Southern Pines
Harvey A. Page, Pikeville, Ky.
Irl T. Sell III, Phoenix
Clinton W. Wilson, Benton Harbor, Mich.

Class of 1958

David B. Crosland, Concord
George E. Ennis, Hickory
Luther S. Nelson, Amarillo

Class of 1959

James A. Kiley, Kalispell, Mont.
Edward L. Mitchell, Prospect, Ky.
Julian W. Selig Jr., Norfolk
Shahane R. Taylor Jr., Greensboro
Franklin D. White, Siler City

Class of 1960

J. Thomas Fox Jr., Charlotte
James R. Harper, Durham
Duncan S. Owen Jr., Richmond

Class of 1961

H. David Bruton, Carthage
William S. Gibson Jr., Riverside, Pa.
Richard W. Hudson, Bayboro
W. Ray Samuels, Charlotte
W. Ferrell Shuford Jr., Wilmington

Class of 1962

Karl L. Barkley, Greensboro
William R. Bibb, Ph.D., Oak Ridge, Tenn.
Joseph H. Callicott Jr., Lynchburg
G. Thomas Davis, Asheboro
Ray M. Hayworth, Knoxville
Ward N. Madison Jr., Wichita
William R. Pitser, Winston-Salem
J. Patrick Pittman, Greenville, S.C.
Lambros C. Rigas, Rome, Ga.

Class of 1963

Robert Cowan, Winston-Salem
John W. Dalton Jr., Santa Monica, Calif.
William Brown Deal, Gainesville
A. Everette James Jr., Nashville, Tenn.
Charles J. Sawyer III, Ahoskie
Jerry A. Smith, Augusta, Ga.
W. Landis Voight, Edenton

Class of 1964

M. Lawrence Berman, Nashville
Robert D. Croom, Chapel Hill
Clyde M. Gaffney III, St. Petersburg, Fla.
Murphy F. McGirt Jr., Kinston
Wayne B. Venters, Jacksonville

Class of 1965

Hal Franklin Collier, Atlanta
Robert L. Grubb Jr., Glendale, Mo.
Robert T. Kindley, North Biloxi, Miss.
Betty Greene Stewart, Valdosta, Ga.

Class of 1966

J. Curtis Abell, Statesville
Robert P. Barringer, Gastonia
William M. Crutchfield, Elizabeth City
Lewis P. Hicks, Lexington, Ky.
Thomas J. Koontz, Winston-Salem
Hugh G. Murray Jr., Atlanta
W. Hunter Vaughan, Steubenville, Ohio

Class of 1967

E. Franklin Hart Jr., Morganton
Hugh T. Lefler Jr., Fort Worth
Jacob A. Lohr, Charlottesville
James N. McLamb, Orange Park, Fla.
Rudolph I. Mintz Jr., Kinston
William B. Riley Jr., Houston
Henry C. Thomason Jr., Gastonia
Barry M. Welborne, Charlotte

Class of 1968

George W. Bensch, Stockton, Calif.
Philip D. Coleman Jr., Babylon, N.Y.
I. Alan Craig, New Bern
Thoeodora L. Gongaware, Savannah
Joseph W. Griffin Jr., Augusta, Ga.
Hoke F. Henderson Jr., Columbia, S.C.
Ronald F. Joyner, Greensboro
Carole W. Samuelson, Birmingham
Herman O. Thompson Jr., Columhia, S.C.
F. Charles Tucker Jr., Pensacola
Jerry C. Woodard, Wilson

Class of 1969

Edward H. Brenner, Freehold, N.J.
Frank B. Gray, Knoxville,
Donald M. MacQueen, Wilmington
John C. Triplett, Palisade, Colo.
J. Gilbert Wallace, Southern Pines
Nelson B. Watts, Asheville

Class of 1970

Daniel L. Crocker, Rocky Mount
Charles E. Crumley, Lincolnton
James D. Melton, Glen Alpine
Charles E. Thompson, New Rochelle, N.Y.
Dewey D. Walker, Englewood, Colo.
Edwin L. Walker, Englewood, Colo.

Class of 1971

J. Richard Auman, Charleston
Michael R. Knowles, Chapel Hill
Frederick S. Neuer, Emporia, Kansas
William B. Pittman, Rocky Mount
James A. Shivers, Asheville

Class of 1972

(see also Special Projects below)

Constance Farthing Lefler, Ph.D., Fort Worth

Class of 1973

E. Daniel Griffin Jr., Charlotte
R. Adron Harris, Ph.D., Columbia, Mo.
Colin D. Jones, Winton
James N. Martin Jr., Jackson, Miss.
Robert R. Walther, New York

Class of 1974

Charles D. Collins, Richlands, Va.
Margaret A. Harper, Winston-Salem
C. Norman Hurwitz, Hamilton, Ohio
C. Fredric Reid, Winston-Salem
Suzanne V. Sauter, Chapel Hill
David E. Tart, Hickory
David T. Tayloe Jr., Goldsboro

Class of 1975

Julian T. Brantley Jr., Falls Church
Claudia P. Carbonetto, Fayetteville, N.Y.
Salvatore T. Carbonetto, Ph.D., Fayetteville, N.Y.
Eric H. Helsabeck, Bath, N.Y.
Ernest J. F. Krug III, El Paso
Charles P. Langley III, Shelby
Frank H. Moretz, Asheville
Joseph R. Pringle Jr., North Charleston, S.C.
Carol R. Teutsch, Atlanta
Michael H. Young, Asheville

Class of 1976

W. Bryson Bateman Jr., Goldsboro
Jean C. Bolan, Washington, D.C.
Nancy P. Chaney, Baton Rouge
Joseph R. Haskett Jr., Hertford
James S. Parsons, Raleigh
Sheldon M. Retchin, Chapel Hill
David F. Silver, Asheville

Class of 1977

Joseph E. Craft, New Haven, Conn.
William B. Harden, San Antonio
Frederick H. Mabry Jr., Laurinburg
S. Ray Mitchell, Cedarhurst, Md.
Richard H. Weisler, Raleigh

Class of 1978

William L. Bell, Robbins
Brian J. Cohen, Hamden, Conn.
Paul W. Coughlin, Durham
Peter A. Schlesinger, Roseville, Minn.

Class of 1979

Charles H. Barrier, Kings Mountain
Sharon M. Foster, Chapel Hill
Michael S. Garrison, Lexington
Darlyne Menscer, Charlotte
James G. Peden Jr., Charleston, W.Va.
Margery Sue Sved, Allston, Mass.
Frances R. Thomas, Chicago
Paul A. Vadnais, Ocean Springs, Miss.
C. Phillip Whitworth, Minneapolis
Leonard S. Wojnowich, Savannah

Class of 1980

Michael E. Beasley, Chapel Hill
Barry J. Freeman, Marina Del Ray, Calif.
Steven K. McCombs, Chapel Hill
Ben D. Thomas Jr., Savannah

Class of 1981

Ben H. Battle Jr., Winston-Salem
David M. Deitz, Portland
Weldon H. Jordan Jr., Palo Alto, Calif.
Garland C. King, Weaverville
Jane E. Lysko, Chapel Hill

Class of 1983

Joan Templeton Perry, Raleigh

Class of 1984

Steven J. Citron, Matthews
Ronald P. Hargraves, Chapel Hill

Class of 1985

Leslie Ann Bunce, Chapel Hill

Class of 1986

Albert J. Osbahr III (M.D.-Ph.D. program), Chapel Hill

Medical Alumni Weekend brings faculty and former students together. Dr. H. Robert Brashear Jr. (left), professor of orthopedics and Dr. Peter R. Bream, '72, of Jacksonville, Fla., were among those who renewed acquaintences during last spring's festivities. Medical Alumni Weekend, scheduled for March 25-26 in 1983, is one of the activities supported by contributions to the Loyalty Fund.

Former housestaff

Harry H. Ballard, New Bern
A. John Bambara, Bridgewater, N.J.
Robert S. Boger, Myrtle Beach
Marianne S. Breslin, Chapel Hill
James H. Butler, Winston-Salem
Ritchie P. Gillespie, APO San Francisco
W. Benson McCutcheon, Durham
Richard A. Niles, Lynchburg
Alexander J. Sabo, Parkerburg, W.Va.
Kenneth M. Selig, Glastonbury, Conn.
Bryce Templeton, Philadelphia

Medical allied health

Patsy Bost Abell, BSPT '65, Statesville
Sharon Patricia Alwood, BSPT '78, Greeley, Colo.
Sandra Lynn Barnes, BSPT '71, Aurora, Colo.
Harriett Baugh Bost, BSPT '65, Winston-Salem
Lois Oakley Buchanan, BSPT '64, Richmond
J. Herman Bunch Jr., Raleigh
Rebecca Deal Burgess, CMT '64, Hickory
Barbara Burpee, MACT '75, Ann Arbor, Mich.
Laura Harrison Dudley, BSPT '74, Rocky Mount
Rose Little Hamm, BSPT '69, Long Beach, Calif.
Rose Marie Byrd Harrison, BSPT '73, Winston-Salem
Helen Dean Kennedy, BSPT '80, Arendtsville, Pa.
Margaret Whelan LaManna, BSMT '77, Shaker Heights, Ohio
Carol Bassett McManus, BSPT '69, Seattle
Marlys Panning Mitchell, Ph.D. '68, Chapel Hill
Nicole Ann Morris, BSPT '80, Charlotte
Judith Smith Redding, BSMT '74, New Orleans
Kathryn Hill Rutz, BSPT '72, Ithaca, N.Y.
Peggy Lowry Strickland, BSPT '78, Pembroke
Irma J. Wilhelm, faculty, Chapel Hill

Faculty

H. Robert Brashear Jr., Chapel Hill
Floyd Denny, Chapel Hill
John A. Ewing, Chapel Hill
Mary Jane Gray, Hillsborough
Mary Ellen Jones, Chapel Hill
Edith R. MacRae, Chapel Hill
Campbell McMillan, Chapel Hill
Paul Munson, Chapel Hill
Joseph S. Pagano, Chapel Hill
Ross J. Simpson Jr., Chapel Hill
Colin G. Thomas Jr., Chapel Hill

Friends

Leon P. Andrews Jr., Wilmington
John W. Becton, Chapel Hill
Edward Perry Benbow Jr., Greensboro
Amelia Peden Burke, Chapel Hill
Geneva H. Cameron, Broadway
Collier Cobb Jr. (DSA '58), Chapel Hill
Gerald W. Cook, Ft. Lauderdale
Elizabeth Grayson Deal, Gainesville
J. Daniel Ferguson Jr., Greensboro
Marie Allison Foard, Baltimore
Janice K. King, Weaverville
Elizabeth McMillan Kirkland, Wilson
Jon J. Lancaster, West End
Russell C. Lewis Jr., Charlotte
Mack Lipkin, Durham
James T. Lohnes Jr., Johnsville, N.Y.
A. Kelly Maness Jr., Greensboro
Mrs. Campbell McMillan, Chapel Hill
Harry V. Meighan, Charlotte
Marolyn M. Parker, Newport News
Barbara J. Perry, Kinston
Elizabeth B. Selig, Norfolk
Charles E. Smith, Chapel Hill
Margaret S. Stahl, Mechanicsburg, Pa.
Monte N. Wallace, Southern Pines
Princess Stellings Williams, Durham

Matching gifts

Arthur Young Foundation
Exxon Educational Foundation
Southern Bell Telephone Company
Squibb Corporation

Special class projects

Spicer-Breckenridge Memorial Fund

Class of 1939

Jesse Appel, Kew Gardens, N.Y.
D. Houston Buchanan Jr., Denver
Henry T. Clark Jr., Chapel Hill
Ralph Siler Morgan, Sylva
Max M. Novich, South Orange, N.J.
Mack Simmons, Waverly, Ga.
Edmund R. Taylor, Columbia, S.C.
Thomas G. Thurston II, Salisbury

Class of 1940

John B. Graham, Chapel Hill

Friends

Nelson G. Hairston, Chapel Hill

Class of 1972 Scholarship Fund

Class of 1972

Larry L. Adams, New Bern
Neal A. Adkins, Rocky Mount
Robert L. Barnes III, Knoxville
Myron H. Brand, Brooklyn
Peter R. Bream Jr., Jacksonville, Fla.
L. Franklin Cashwell, Greensboro
Peter G. Chikes, Concord
W. Andrew Cook, Houston
Randolph B. Cooke, Owego, N.Y.
Charles Davant III, Blowing Rock
W. Rodwell Drake Jr., Henderson
Cecil Farrington, Salisbury
Noel K. Free, Cincinnati
J. McNeil Gibson, Pennington, N.J.
John M. Gilkey Jr., Lynchburg, Va.
Karen W. Green, Holden, Mass.
Walter B. Greene, Chapel Hill
Alger V. Hamrick III, Raleigh
L. Clayton Harrell III, Charlotte
Sampson E. Harrell, Durham
Gregory F. Hayden, Charlottesville
F. Christian Heaton, Raleigh
John T. Henley Jr., Fayetteville
Larry A. High Jr., Rocky Mount
William B. Horn, Boone
Thomas G. Irons, New Bern
Joseph A. Jackson, Pilot Mountain
Howard S. Kroop, Woodbury, N.J.
Robert W. Little, Burlington
William E. Long, Newton
John R. Lurain III, Oak Park, Ill.
John T. Manning Jr., Houston
Steven R. Mills, Chapel Hill
Scott Pharr III, Williamsburg
James S. Reed Jr., Leawood, Kansas
William J. Simons, Asheville
Ronald J. Stanley, Boone
Richard C. Taft, Greenville
William C. Tate II, Banner Elk
G. Dean Wilson Jr., Johnson City, Tenn.
J. Frederick Wolfe, Knoxville
Michael F. Yarborough, Raleigh

Friends

Janine J. Wilson, Johnson City, Tenn.

Special designated gifts

Center for Alcohol Studies

Julius W. Morris, Nashville

Department of Anatomy

John G. Finley, Coral Gables, Fla.

J. Andrews Memorial Fund in Biochemistry

Alexander C. Mitchell, '43-March, Frenchtown, N.J.

Kenneth M. Brinkhous Distinguished Professorship Fund

J. Ronald Edwards, '58, Raleigh

Cancer Research Center

Joanne N. Anderton, Mebane
Lawrence J. Goldrich, Virginia Beach (five gifts in memory of Mr. Herbert Cashvan, Mr. A. Pogson, Mrs. Rebecca Schwartz, Mrs. Betty Wagner Stegall and Mrs. Pearl Sugarman)
E. Eugene Jackson, Chapel Hill (two gifts in memory of Mr. Marvin G. Albert and Mrs. Betty Wagner Stegall)

Coronary research

Lawrence J. Goldrich, Virginia Beach (two gifts in memory of Mr. Pasquale V. Arcese and Mr. Milton Drexler)

Thomas J. Dark Fund in Otolaryngology

Thomas J. Dark, DSA '82, Fort Lauderdale

Diabetes research

Anita S. Galliher, Carrboro
Timothy N. Galliher, Carrboro

Hemophilia research

Luther B. Hester Jr., Sanford

Michiko Kuno Research Award Fund

David L. McIlwain, Chapel Hill

The Annual Alumni Banquet is, for many, the highlight of the Medical Alumni Association year. The event includes recognition of reunion classes and presentations of Distinguished Faculty and Distinguished Service Awards. The most recent recipient of the association's Distinguished Faculty Award, Dr. James F. "Turk" Newsome, '47, is shown here at the 1982 banquet with Norma Berryhill, widow of former Dean W. Reece Berryhill.

Medical Foundation Scholarship Fund

Henry H. C. Poliakoff, Little Neck, N.Y.

Medical Parents Club

Mr. and Mrs. Henry N. Kirkman, Chapel Hill
Mr. and Mrs. James V. Lee, Broadway

Division of Neurosurgery

Lenora S. Courtland, Charlotte

Division of Orthopedic Surgery

David A. Rendleman III, '70, Raleigh

Palumbo Fund in Obstetrics and Gynecology

Rick W. Lambeth, HS '78, Durham

Department of Pathology

Christine N. Vogel, Ph.D. '78, Coral Gables, Fla.

Department of Physiology for Development

Frederick W. Kerr, Kasson, Minn.

The Co-Founders

The Co-Founders' Club is an unrestricted gift club founded in 1966. Its members support vital projects of the School of Medicine through unrestricted annual gifts of at least $1,000. Members of the Co-Founders' Club for 1981-82 are:

Class of 1916

Fred C. Hubbard, N. Wilkesboro

Class of 1927

John S. Rhodes, Raleigh

Class of 1928

M. D. Bonner, Greensboro

Class of 1930

Roscoe B. G. Cowper, Big Spring, Texas

Class of 1931

Haskell W. Fox, Greenville, Tenn.
Jean C. McAlister, Greensboro
William S. Wall, Rocky Mount

Class of 1932

Mary Margaret McLeod, Sanford

Class of 1935

Frank Edmondson Jr., Asheboro

Class of 1936

Annie Louise Wilkerson, Raleigh

Class of 1939

Jesse Appel, Kew Gardens, N.Y.
D. Houston Buchanan Jr., Denver
Henry T. Clark Jr., Chapel Hill
C.E. Cloninger, Conover
J. Gilmer Mebane, Rutherfordton
Ralph Siler Morgan, Sylva
Edwin A. Rasberry Jr., Wilson
Edmund R. Taylor, Columbia, S.C.
Thomas G. Thurston II, Salisbury
Samuel B. Willard, Doylestown, Pa.

Class of 1940

H. Haynes Baird, Charlotte
John B. Graham, Chapel Hill
H. Lee Large Jr., Charlotte

Class of 1941

Foyell P. Smith, Lexington
Ernest H. Yelton, Rutherfordton

Class of 1942

F. A. Blount, Winston-Salem
John F. Lynch, High Point

Class of 1943 March

John R. Chambliss, Rocky Mount
Kenneth W. Wilkins, Goldsboro

Class of 1943 December

Joseph W. Baggett, Fayetteville

Class of 1945

Hampton Hubbard, Clinton

Class of 1946

Ira A. Abrahamson Jr., Cincinnati
Edward G. Bond, Edenton
William W. Forrest, Greensboro
Luther W. Kelly Jr., Charlotte
Robert S. Lackey, Charlotte
George A. McLemore Jr., New York
Arthur R. Summerlin, Raleigh
Dexter T. Witherington, Kinston

Class of 1949

Rose Pully, Kinston

Class of 1950

Frederick O. Bowman Jr., Riverdale, N.Y.
W. G. Byerly Jr., Hickory
John A. Kirkland, Wilson

Class of 1951

Baxter H. Byerly, Tallahassee
S. Vance Huffman, Elon College
Vernon W. Pugh Jr., Raleigh
George R. Smith Jr., Shawsville, Va.

Class of 1954

Malcolm Fleishman, Fayetteville

Class of 1955

Henry W. Abernethy, Hickory
Walter E. Deyton, Danville, Va.
John W. Foust, Charlotte
James E. Glenn, Jacksonville, Fla.
James W. Hayes III, Burlington
Charles Herring, Kinston
Samuel G. Jenkins Jr., Elizabeth City
William C. Ruffin Jr., Gainesville, Fla.
Robert L. Summerlin Jr., Dublin

Class of 1956

William Barry, Fayetteville
John W. Deyton Jr., Jacksonville
John T. Evans, Chattanooga
William R. Harris, Hickory
William B. Wood, Chapel Hill

Class of 1957

Joseph J. Allen, Portsmouth, Va.
James Grayson Hall, Dobson
Benneth A. Hayes, Fayetteville
George L. Irvin III, Coral Gables, Fla.
Richard V. Liles Jr., Albemarle
James H. M. Thorp, Rocky Mount

Class of 1958

George E. Ennis, Hickory
P. D. McMichael Jr., Reidsville

Class of 1959

Robert C. Brown, Rutherfordton
Robert L. Green, Winston-Salem
A. Tyson Jennette, Wilson
Morris A. Jones, Durham
Arthur Sherman Morris Jr., Asheville
Martha K. Sharpless, Greensboro
Shahane R. Taylor Jr., Greensboro

Class of 1960

Sellers L. Crisp, Greenville
James M. Marlowe, High Point
K. Frank McCain, Winston-Salem
John A. Young, Charlotte

Class of 1961

Edward A. Sharpless, Greensboro
Jerry Edward Smith, Southern Pines

Class of 1962

Marion W. Griffin, Asheboro
John L. Monroe, Pinehurst
Abner C. Withers, Drexel

Class of 1963

Henry W. Gerock Jr., Jacksonville

Class of 1964

Bruce Berryhill, Charlotte
H. Stanley Gregory, Jacksonville

Class of 1965

Edgar G. Gallagher Jr., Jacksonville
Donald P. Whitley, Richmond

Class of 1966

Paul L. Burroughs Jr., Raleigh
N. Park Davis II, Wilson
Walter F. Steele, Valdese

This is an artist's rendering of the Lineberger Cancer Research Center building. The $8.4 million facility is now under construction and is scheduled for completion in 1984. The building is named in honor of the Lineberger family of Belmont, long-time supporters of the University and the School of Medicine. The Lineberger building will house the center's administrative offices, a library and conference room, laboratory and office space for faculty investigators and containment facilities for chemical carcinogenesis, recombinant DNA and virus research.

Class of 1967

O. Drew Grice, New Bern
H. R. Parker Jr., Jamestown

Class of 1968

W. Franklin Hancock Jr., Roanoke Rapids
Robert G. Martin, Southern Pines
Jack G. Wall, Graham

Class of 1969

Paul Eugene Brown, Hickory

Class of 1970

William J. Busby, Thomasville
William R. Jordan, Fayetteville
David A. Rendleman III, Raleigh
Rick I. Suberman, Chapel Hill

Class of 1971

R. Randolph Powell, Clinton
George C. Venters, Raleigh

Class of 1973

Franklin S. "Rusty" Clark, Fayetteville

Class of 1974

Charles D. Collins, Richlands, Va.
John R. Forehand, Richlands, Va.

Class of 1976

William A. Richey, New Bern

Class of 1982

Wade H. King, San Francisco

Friends

Willis A. Archer, Rutherfordton
Elizabeth A. Armfield, Greensboro
Jane Armfield, DSA '81, Greensboro
Nathan M. Ayers, Greensboro
Pauline Barrett, Waterloo, Iowa
Harold H. Bate, New Bern
Louis Bates, Greensboro
John Becton and Nancy Tannenbaum, Chapel Hill
Herman Bernard, High Point
Eunice Bernhard, Ft. Lauderdale
Mr. and Mrs. George S. Blackwelder Jr., Hickory
Mayo Boddie, Rocky Mount
Mr. and Mrs. John C. Bolt Jr., Wilson
Julian C. Brantley Jr., Rocky Mount
Leo Brody, Kinston
Joseph M. Bryan Sr., Greensboro
Joseph M. Bryan Jr., Southern Pines
Harry M. Bryant Sr., Gastonia
Sam J. Calvert Sr., Greenville, Tenn.
Dan G. Cameron, Wilmington
Arthur W. Clark, Durham
Walter B. Clark, Fayetteville
Mr. and Mrs. L. F. Cohen, Sanford
Benjamin Cone, DSA '57, Greensboro
John A. Cross Jr., Newport News
J. Slade Crumpton, Durham
Thomas J. Dark, DSA '82, Ft. Lauderdale
Walter R. Davis, Midland, Texas
Alan T. Dickson, Charlotte
Heidi Ewing, Chapel Hill
Mr. and Mrs. Marshall M. Feaster Jr., Brevard
Howard Ferguson, Randleman
A. E. Finley, Raleigh
Henry A. Foscue, DSA '73, High Point
M. Carr Gibson, Lumberton
Elizabeth S. Goodwin, Apex
Edward I. Greene, Asheville
Mr. and Mrs. Guy Guthrie, Kinston
Bernard Gutterman, Greensboro
Theodore W. Hahn, Pompano Beach, Fla.
Nelson G. Hairston, Chapel Hill
James A. Hardison Jr., Wadesboro
William T. Harris, DSA '77, Charlotte
Luther B. Hester Jr., Sanford
Phillip Hettleman, New York
George Watts Hill Sr., DSA '57, Durham
A. L. Hobgood, Smithfield
Mr. and Mrs. Howard Holderness, DSA '71, Greensboro
G. T. Holmes, Pinehurst
Jerry Jerome, Brevard
James A. King, Raleigh
Gordon B. LeGrand, Raleigh
Walter S. Lineberger, Belmont
Mrs. Zachary F. Long, Rockingham
Hector MacLean, DSA '78, Lumberton
Mr. and Mrs. J. H. McCombs Jr., Morganton
Joe McLeod, Fayetteville
Dalton L. McMichael, Madison
Avery W. McMurry, Shelby
Leigh H. McNairy, Kinston
J. H. Millis, High Point
C. Hugh Moretz, Newton
Mr. and Mrs. C. L. Morton Jr., Chapel Hill
A. G. Myers Jr., Gastonia
Elmer P. Nance, Lexington
Thomas P. Nash, Elizabeth City

Charles S. Norwood Jr., Goldsboro
James S. Nowell, Franklinton
J. Harvey Oliver Jr., Fayetteville
Mrs. H. R. Parker Jr., Jamestown
Irene Poole, Raleigh
Julius M. Ramsay III, Asheboro
Mr. and Mrs. Gene Ramsey, Brevard
W. Kenan Rand Jr., Durham
R. Beverly Raney, DSA '72, Chapel Hill
Mr. and Mrs. E. R. Rankin, Chapel Hill
Woodrow W. Reeves, Franklin
J. Sidney Rice, Hickory
Mrs. C. V. Richardson, Star
J. P. Riddle, DSA '80, Fayetteville
Henry J. Ritchie, Concord
Julian H. Robertson Jr., New York
James M. Ross, Claremont
Constance Rothermel, New York
J. Paul Russell, Troy
Luther C. Sappenfield Jr., Fayetteville
Sol Schechter, Kinston
Samuel B. Schneider, Winston-Salem
Curtis Smithdeal, High Point
E. B. Spangler, Greensboro
Randolph L. Speight, New York
John W. Stackhouse, Goldsboro
Capt. and Mrs. Lawrence E. Stahl, Gulfstream, Fla.
Mrs. A. B. Stoney, Morganton
Robert L. Stowe Jr., Belmont
John C. Strickland, Goldsboro
Kenneth S. Tanner Jr., Rutherfordton
Brent Temple, Greensboro
Dan R. Thomason, Fayetteville
Martin W. Thompson, Charlotte
D. J. Thurston Jr., Charlotte
John W. Watson, Oxford
Thomas J. White, Kinston
Lucinda Wilcox, Chapel Hill
Mable Womack, Reidsville
Sue Yates, Asheboro
Peter R. Young, Greensboro

Other contributors to special projects

Mr. and Mrs. Sonny Adams, Fayetteville
Mr. and Mrs. Ralph B. Adcock, Hickory
Phillip G. Arnold, Rochester, N.Y.
Mr. and Mrs. William J. Atkinson, Fayetteville
Mett B. Ausley, Warsaw
Key L. Barkley, Raleigh
E. V. Benbow, Winston-Salem
Mr. and Mrs. Clyde W. Boone, Fayetteville
Mr. and Mrs. E. D. Bosserman, La Grange, Ky.
Julius S. Brody, Kinston
Jacquelyn G. Burgess, Raleigh
M. Paul Capp, '58, Tuscon
Robert L. Carithers, Richmond
The Estate of Willard G. Carithers, Statesville
Verne Caviness, '19, Raleigh
Richard Chatham, Elkin
Mr. and Mrs. C. Lee Clarke, Goldsboro
Louise V. Coker, Chapel Hill
Joseph J. Cox, High Point
Daniel L. Crocker, '70, Rocky Mount
Lawrence M. Cutchin, '62, Tarboro
Jack P. Curtis, Chapel Hill
Alexandria H. Davis, Winston-Salem
Gordon H. Davis, Chapel Hill
Rita M. Dewey, Goldsboro
Edgar S. Douglas, Greenville
Sanford Doxey Jr., Fayetteville
Mr. and Mrs. Ralph Dupree, Fayetteville
Pauline Edwards, Henderson
David and Dayle Fowler, Fayetteville
Mike Fowler, Fayetteville
Nick and Kathy Fowler, Stone Mountain, Ga.
Mr. and Mrs. Ronald G. Fowler, Charlotte
Mr. and Mrs. Vance G. Fowler, Fayetteville
Capt. and Mrs. Wade R. Fowler Jr., Del Rio, Texas
J. S. Gaul Jr., '44, Charlotte
Benjamin Gold, '45, Rocky Mount
W. D. Goldston Jr., Eden
Mr. and Mrs. Daniel Gomez, Fayetteville
Alfred W. Hamer, '58, Morganton
William C. Hayes, Wilkesboro
R. W. Hayworth, '16, Asheboro
Mr. and Mrs. Ralph Heedick, Charlotte
Mr. and Mrs. Milton D. Highsmith, Fayetteville
Annie B. Hobgood, Kinston
R. N. Hoggard, Lewiston
Wyche Horton, Durham
Helen E. Hoyt, Rose Hill
Mr. and Mrs. George T. Lewis, Fayetteville
Lt. Col. and Natalie Lewis, APO New York
Fred Lovette, Wilkesboro
Beverly B. Luther, Richmond
C. Knox Massey, DSA '57, Chapel Hill
Mrs. H. Houston Merritt, Bronxville, N.Y.
James E. Meyer, Charlotte
Clement R. Monroe, '21, Pinehurst
James F. Newsome, '47, Chapel Hill
Everett R. Nordstrom, Chapel Hill
Mr. and Mrs. Lee Norris, Fayetteville
Homer D. Petrou, Henderson
Allen Pettigrew
Thomas E. Powell III, Burlington
John F. Rhodes, '62, Raleigh
Mr. and Mrs. Luz Rojas, Marietta, Ga.
Oliver R. Rowe, Charlotte
Robert E. Sevier, '66, Greensboro
Mr. and Mrs. Bill Smith, Fayetteville
Cameron L. Smith, '71, Greenville
Louise W. Smith, Wade
James A. Valone, Raleigh
Emma Vaughn, High Point
Kelley Wallace Jr., '63, Greenville
Louise M. Ward, Chapel Hill
K. E. and S. J. West, Fayetteville
Robert L. West, '59, Greenville
Mrs. John C. Whitaker, Winston-Salem
Benson Wilcox, '57, Chapel Hill
Gene Williams, Bladenboro
Hadly M. Wilson, '50, Boone
Mr. and Mrs. T. R. Winchell, Iona, Mich.
The Estate of A. T. Withrow, Charlotte
Mack Wood, Mt. Airy
Georgina P. Yeatman, Beaufort
Robert Zeppa, HS '55, Miami

Corporations

Alcoa Foundation
Allied Chemical Corporation
Alma Desk Company
Altrusa Club
Barclays American Foundation
The Belk Foundation
Beta Sigma Phi
Bitting Electric, Inc.
Boddie-Noel Enterprises
The Brenner Foundation
The Burroughs Wellcome Fund
Carolina Biological Supply
Carolina Power and Light Company
The Carter Foundation
Collier-Cobb and Associates
The Cooper Group
Covington Diesel - Sales and Parts Department
Cummin-Carolina, Inc
The Dickson Foundation
The Dover Foundation
Drexel Heritage Furnishings, Inc.
Duke Power Company
K. R. Edwards Leaf Tobacco Company
Equitable Life Insurance Company
Factory Mutual Engineering Company
The Gordon Fund
Hampton Industries, Inc.
Hayworth Foundation
Hickory Furniture Mart
High Point Furniture Industries
Hillview Pentacostal Free Will Baptist Church
IBM Corporation
North Carolina Jaycees
Jefferson-Pilot Corporation
The Knapp Foundation
Lee County Cancer Society
Leggetts of Henderson Mall
The Martha and J. Spencer Love Foundation
The Lineberger Foundation
Monsanto Chemical Company
Myers-Ti-Caro Foundation
The Nalle Clinic
NCNB Corporation
The Northwestern Bank
Olin Corporation
J. C. Penney Company
The Philpott Foundation
Pilot Life Insurance Company
Reeves Brothers Foundation
R. J. Reynolds, Inc.
Rohm and Haas Company
Rowe Corporation
Sigmund Sternberger Foundation
Southern Bell Telephone Company
The Stephens Foundation
Robert L. Stowe Foundation
Thomas Built Buses, Inc.
The Titmus Foundation
The Townsend Company
United Carolina Bank of Fayetteville
Universal Leaf Tobacco Company
The Upjohn Company
The Wayne Foundation, Inc.
Western Electric Corporation
The Weyerhauser Foundation

Extracts

Dr. David E. Eifrig has been reappointed chairman of the department of ophthalmology for a five-year term effective Sept. 1.

Eifrig joined the UNC-CH faculty in 1977 as professor and chairman of ophthalmology when the department added its first full-time staff. Several sub-specialties have been added in the department since then.

In 1980 he was named to the Dr. and Mrs. Sterling A. Barrett professorship in ophthalmology, the first faculty member to hold that endowed chair. He is a specialist in vitreous and retinal diseases and surgery, and in intraocular lens implantation.

Before joining the UNC-CH faculty, Eifrig was a faculty member at the universities of Minnesota and Kentucky and a fellow at the Jules Stein Eye Clinic at the University of California at Los Angeles.

An Illinois native, he graduated from Carleton College in Minnesota and earned his M.D. degree from the Johns Hopkins University in Maryland, where he also completed his residency.

A regular exercise program is an integral part of helping to prevent the crippling joint diseases associated with hemophilia, according to physicians in the School of Medicine.

They prescribe a 15-minute daily exercise program for patients with severe hemophilia and encourage them to participate in recreational sports such as swimming, softball and kickball.

Dr. Walter B. Greene ('72), assistant professor of orthopedic surgery, explained that repeated bleeds into the joints frequently cause severe arthritis in patients with hemophilia. He said the main reason hemophiliacs cannot work and lead normal adult lives is not the bleeding tendency, but rather the crippling arthritis that accompanies the disease.

Greene studied 32 hemophiliac patients, ranging in age from 7 to 51 years, over a six-month period. Each patient's strength was measured at the beginning of the study and all were encouraged to do the strengthening program for 15 minutes every day.

After six months, repeat testing demonstrated significant strengthening of the knee muscles without an increase in joint bleeds. Patients who exercised the most and had the least severe joint problems had the greatest improvement.

"Although our study was too short to determine if effective muscle strengthening will change the destructive course of joint disease in patients with hemophilia," Greene said, "we have seen enough improvement in joint function to continue to recommend that this 15-minute exercise regiment be done daily by patients with severe hemophilia, whether or not they have functional joint difficulty."

Researchers in the School of Medicine have reported findings that certain cold- and flu-causing viruses triple the risk of developing middle ear infections, which afflict 75 percent of all American children in the first years of life.

Controlling those viruses could prevent many of the infections, they said. Known as Otitis Media with Effusion, the infections reduce children's ability to hear and can require surgery.

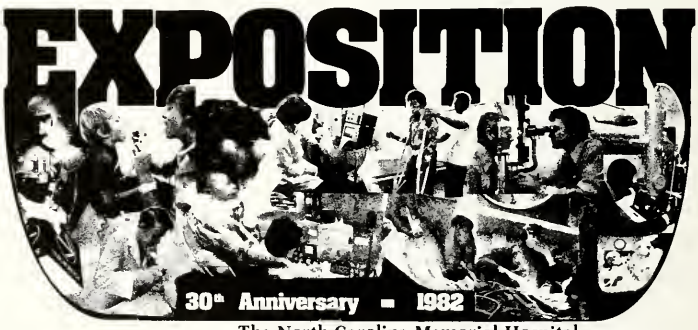
The researchers reported their findings—the results of a 14-year study—in the New England Journal of Medicine.

Dr. Frederick Henderson ('70), assistant professor of pediatrics and a member of the study team, said that most research has concentrated on bacteria because they multiply in children's ears during bouts with middle ear infections. The UNC-CH study identifies kinds of viral infections that can help bacteria get started.

Those viruses are: respiratory syntical virus, influenza virus types A and B, and adenovirus. Peaks in the isolation of the respiratory and adenovirus infections were consistently associated with high rates of ear infection, Henderson said, and five other viruses were found to have some effect as well.

Bacterial infections in the nose and throat carried only half the risk of bringing on ear infections, he said, but the study produced some evidence that two bacteria commonly associated with ear infections might interact with some viruses to cause infection.

The study uncovered the importance of viruses by examining infants and toddlers regularly for 14 years. Medical data were collected from 83 children over the course of the study, conducted at the UNC-CH Frank Porter Graham Child Development Center.



The North Carolina Memorial Hospital

North Carolina Memorial Hospital's 30th anniversary was celebrated with an exposition in Chapel Hill's University Mall, Oct. 22-23. Some 20 booths—including exhibits, demonstrations and health screening—were on display. The purpose of the event was to increase the public's awareness of the scope of services the hospital offers and to generate community pride in the hospital, its medical staff and employees. This special logo adorned various promotional materials.

Extracts

"Caring for Kids" a 46-article series on children's health issues recently was sent to more than 30 nondaily newspapers throughout the state by the office of medical center public affairs.

The articles deal with all kinds of problems concerning children, from chicken pox to toilet training, from reading to choosing a day-care center.

The articles were written by faculty members and other community professionals associated with the University and the hospital. They were coordinated by Dr. Michael Sharp, assistant professor of community pediatrics, and Susan Russell, Orange County department of social services.

The series was made available to the newspapers by the public affairs office and the UNC-CH News Bureau.

Dr. Larry W. Arnold, research assistant professor of bacteriology, has received a special fellowship from the Leukemia Society of America.

The $37,000 award, one of 70 research scholarships and fellowships granted this year, will allow Arnold to concentrate on research in immunology, the study of the body's immune defense system against disease in order to bolster its own natural ability to fight leukemia. The fellowship lasts for two years.

Arnold is a Nebraska native who earned his B.S. degree in microbiology from the University of Nebraska at Lincoln in 1973 and his M.S. in 1976 and Ph.D. in 1979 in immunology and microbiology from the University of Nebraska Medical Center. He had post doctoral training at UNC-CH.

The Leukemia Society will award nearly $3 million in grants this year to 165 scientists at 75 institutions. Other UNC-CH researchers receiving society funding are Dr. Arthur H. Lockwood, assistant professor of anatomy and member of the UNC-CH Cancer Research Center, and Dr. Michael Jeffrey Black, special fellow in the department of biochemistry and nutrition.

Children with muscular dystrophy frequently have problems in school but staff members of the muscular dystrophy clinic at North Carolina Memorial Hospital have found that many of these problems can be eliminated if parents, teachers and health professionals work together.

Dr. Colin D. Hall, director of the clinic, and Dr. Patricia Porter, a communication disorders specialist, recently completed a study of 35 patients with neuromuscular disease and found that 83 percent of them had school difficulties.

"The school experiences of many of these children had been limited in one way or another by their disease," Hall said, "and in most cases these limitations were the result of inadequate planning or inadequate education of the parties involved."

He said the muscular dystrophy team at the School of Medicine was able to work with the parents and schools and find solutions to 75 to 80 percent of the problems.

The muscular dystrophy clinic at N.C. Memorial is recognized by the Muscular Dystrophy Association, which pays a large portion of treatment costs and provide braces and other therapeutic equipment.

New services for persons with hearing losses are being offered in the School of Medicine.

Included among the services offered are free speech, hearing and language screenings every Friday afternoon. The clinics are located in Wing D of the medical school. Recently completed renovations have added central air conditioning, new clinic rooms and improved audiological facilities.

The new services include assistance for those who need hearing aids. Members of the audiology staff will evaluate a patient's hearing loss and the need for a hearing aid. Patients can try different aids, which are stocked for demonstration, and the staff will assist in the purchase of an aid of the patient's choice from a private vendor.

The center also offers classes for persons with hearing losses, emphasizing proper use and maintenance of hearing aids, family adaptation and techniques for improved communication, including speech reading when necessary.

For more information on the division of speech and hearing sciences clinics or for an appointment, call (919) 966-1006. □

Dr. Robert C. Cefalo, professor of obstetrics and gynecology and director of the maternal and fetal medicine division, addresses a capacity crowd during "Pre-conception Health and Fitness." Sponsored by Project Goodlife, the community seminar was presented Sept. 1 in the clinic auditorium. Speakers in addition to Cefalo, all from the department of obstetrics and gynecology were Drs. William Droegemueller, William N. P. Herbert, John W. Seeds, Watson Bowes and William L. Koontz. Goodlife is a health enhancement program of the School of Medicine and N.C. Memorial Hospital.

Class notes

40s

Truett V. Bennett, C. Med. '43-Dec., is an ENT specialist associated with the Straub Clinic of Honolulu. He and Patricia Henritzy Bennett, his wife, have lived on Oahu since 1962 and would love to hear from any acquaintances who might be passing through. Patricia H. Bennett, one of the first two recipients of the B.S. degree in medical technology, worked as Dr. William deB. MacNider's research technician in 1943-44 in what is now MacNider Hall. "Seems strange to call that building by Dr. Billy's name!" she writes.

David S. Citron, C. Med. '43-March, director of the family practice residency program at Charlotte Memorial Hospital and Medical Center, has been elected to the prestigious Institute of Medicine, an organization chartered in 1970 by the National Academy of Sciences. He was nominated for membership by the UNC-CH School of Medicine.

Citron is among 49 new members elected to the institute raising the total active memberships to 453, effective Jan. 1. Candidates are chosen for major contributions to health and medicine, or to such related fields as the social and behavioral sciences, law and administration.

Election to the institute is both an honor and a working assignment. Institute members make a commitment to devote a significant amount of time to work on a broad range of health policy issues.

"I feel very honored at being able to participate in this organization," Citron commented. "The work done by the institute is significant, and has had a lot to do with federal policies concerning health care and research in this country."

Members of the class of '43 will celebrate the 40th anniversary of their graduation during Medical Alumni Weekend, March 25-26, 1983. The occasion also will include the induction of these alumni into the Manning-Berryhill Club.

50s

Kenneth B. Lewis, M.D. '59, had an article published in the Primary Cardiology Clinics, Vol. 3 No. 4 titled "The Rechargeable Cardiac Pacemaker." Lewis is assistant professor of medicine at Johns Hopkins and chairman of medicine at Franklin Square Hospital in Baltimore.

Eugene Douglas, M.D. '59, of Lumberton has been appointed to a two-year term as director of the Mental Health, Mental Retardation and Substance Abuse Division of the N.C. Department of Human Resources.

He was named to the position by **Sarah Morrow, C. Med. '43,** state director of human resources. Douglas began duties Oct. 15, assuming responsibilities previously performed by **R.J. "Jack" Blackley, C. Med. '51.**

Blackley, will return to full-time clinical duties within the division, at his own request, and will serve as assistant director of medical services and medical advisor to Douglas.

"Dr. Douglas has earned an outstanding reputation within our state and country in his profession. I am confident that great progress will be made under his strong leadership," Morrow said.

Douglas, a native of Greensboro, grew up in Lumberton and began his practice there after graduation from the School of Medicine at UNC-Chapel Hill and training at N. C. Memorial Hospital, completed in 1963.

Robert Brown, M.D. '59, a pathologist, and **Michael S. Garrison, M.D. '79,** an internist, have announced the opening of their practices. They are based at Lexington Memorial. The two physicians, along with **David R. Williams, M.D. '63, James Otis Burke, M.D. '65, William Jarvis Busby, M.D. '70, Lloyd Dermot Lohr, M.D. '70, Samuel Ranchor Harris, M.D. '74,** and **James F. Black, M.D. '75,** were among the physicians featured in a recent two-page article in the Lexington newspaper, The Dispatch. The story described the growth of Davidson County's physician population during the past 10 years.

60s

Andrew Davidson, M.D. '69, along with his associates, has announced that **Peter R. Holyk, HS '82,** has joined him in the practice of ophthalmology in New Bern.

70s

William Byrd, M.D. '70, joined the practice of Dr. Angie Portela and Dr. Mario Fiorilli in Roanoke Rapids on June 28.

H. Clifford Baggett, M.D. '70, of Rocky Mount has three sons now: Kip, 13; Ward, 9 and Powell, born last November. Baggett is in private practice of otolaryngology—head and neck surgery.

Thomas E. Hooper, M.D. '73, has opened a private practice of internal medicine in Wilson.

Michael Robinson, M.D. '73, has completed his graduate training in endocrinology and metobolism at the Mayo Graduate School of Medicine. He is now in practice and teaching in Inglewood, Calif.

Martha Goetsch, M.D. '74, has a private practice in ob/gyn half-time and serves half-time as the director of ob/gyn education at one of the private hospitals in the combined ob/gyn training programs of the University of Oregon.

Michael E. Ende, HS '75, has joined the staff of Charter Hills Hospital of Greensboro. His plans are to reopen his local private practice, and will again be a child psychiatric consultant at the Greensboro Mental Health Center.

Solomon G. Zerden, M.D. '76, is entering the private practice of radiology in Chapel Hill. He and his wife, Stephanie have two children, Arin and Matthew.

Kirk Adams, M.D. '76, has joined in practice with Lambert P. McLaurin, a multi-specialty internal medicine clinic in Chapel Hill.

C. Fred Irons III, M.D. '77, has been appointed as a psychiatrist in the mental health section of Student Health Service at UNC-CH.

James G. Peden Jr., M.D. '79, was recently honored as the outstanding physician in the Charleston (W. Va.) Area Medical Center department of internal medicine. In ceremonies held in Charleston, Peden was presented the Dean's Prize, an award given annually by the Sarah and Pauline Maier Scholarship Foundation in recognition of professional excellence in clinical and academic medicine. Peden, who is in a combined internal medicine and psychiatry residency training program at the Charleston Division of West Virginia University, was cited for his efforts in the areas of patient care, medical education and hospital administration. He will be returning to North Carolina to practice upon completion of this specialty training in 1984.

Class notes

Robert L. Munt Jr., M.D. '77, has begun private pediatric practice in Raleigh.

Barry H. Teasley, M.D. '78, has started practice in ophthalmology in Goldsboro. He and his wife Hope Carson of Durham, have two children Carson Scott, 2½; and Courtney Elizabeth, eight months.

Herman Chavis, M.D. '79, and **Kenneth E. Locklear, M.D. '79** held open house for the public on July 18, for their Robeson Family Practice Associates medical faculty, which opened on July 19.

Charles H. Barrier, M.D. '79, has entered into the private practice of internal medicine in Kings Mountain. He has joined Dr. Scott Mayse, another internal medicine physician, to form the Kings Mountain Internal Medicine Group. Barrier keeps members of the class of '79 in touch with one another via a periodic class newsletter.

William Hugh Craft Jr., M.D. '79, has assumed duties as chief resident in pediatrics and president of the housestaff council at North Carolina Memorial Hospital.

Thomas Barringer, M.D. '79, has joined the Eastway Medical Clinic Professional Association of Charlotte. He will help staff the family care center at Mercy Hospital Medical Park in Pineville.

80s

William T. Landen, H.S. '81, has become an associate of Joseph A. Boyd in radiology at Maria Parham Hospital.

Michael J. Tyler, H.S. '82, has assumed duties as a family practitioner in Chatham County. He is practicing at Chatham Hospital and is working along with **James B. Holt, M.D. '77,** at the East Chatham Medical Center in Pittsboro. He is presently involved in a part-time project at the University of North Carolina dealing with alcoholism.

David C. Jones, H.S. '82, has joined the staff of Aycock and Mebane, M.D., PA, in Mebane.

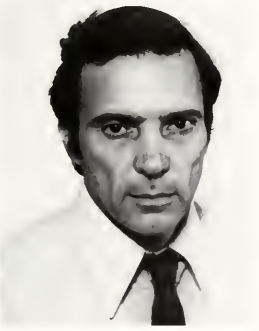
Michael B. Thomas, H.S. '82, has been appointed director of Wake Health Services Wade Ave. Center in Raleigh.

Deaths

William Shipp Justice, C. Med. '24, Asheville
John Hazel Hunt, C. Med. '25, Cincinnati
Griffin C. Daughtridge, C. Med. '29, Rocky Mount
James Workman Culbertson, C. Med. '37, Charleston, S.C.
Ernest Gordon Guy, C. Med. '43-March, Philippi, Wisc.
John T. Manning, DSA, '77, Chapel Hill

William E. Thornton, M.D. '63, has a big interest in keeping people alive and well in space. Selected in 1967 by the National Aeronautics and Space Administration for training as a scientist astronaut, Thornton has monitored life support devices during a number of space flights, but he's still waiting to get into space himself. And with some 70 space shuttle flights scheduled between now and 1987, his chances of doing so are improving.

Thornton first became involved with space medicine during active duty with the U.S. Air Force at its Aerospace Medical Division at Brooks Air Force Base in San Antonio. In the past 15 years, he has logged more than 2,000 hours of jet flying time. The closest he's come, so far, to flying in space was as a physician crew member on a 56-day simulation of a Skylab mission.



Dr. Frank S. French, HS'61, professor of pediatric endocrinology at UNC-CH, has been appointed director of the Laboratories for Reproductive Biology.

The program includes scientists in a variety of disciplines working on molecular mechanisms regulating the formation and maturation of human eggs and sperm, fertilization and embryogenesis. It was established in 1969 under the direction of Dr. H. Stanley Bennet, then chairman of the department of anatomy.

French said the laboratories will provide support for research, establish a training program for interdisciplinary research in reproductive sciences, and sponsor seminars and workshops.

"It is our intention further to strengthen basic research and encourage collaboration among basic and clinical scientists in areas of reproductive function, embryo development, fertility control and infertility," French said.

French, whose main research interest is reproductive endocrinology, has been a professor of pediatrics at the School of Medicine since 1976. He holds an M.D. degree from the University of Rochester and came to Chapel Hill in 1960 as the chief resident in pediatrics.

French has been a member of the U.S. Public Health Service Reproductive Biology Study Section and the World Health Organization Task Force on Methods for the Regulation of Fertilizing Ability of Sperm.

These pearls nuggets of knowledge

Dr. Janet Fischer is a frequent Pearl Lecturer.

Today's pearls may be tomorrow's glass beads, but for now the gems offered in the 1982 Pearl Lectures continue to sparkle. The lectures are three-minute presentations given by faculty members selected by the senior medical school class.

This past spring, three Mandells (actually one was a Mandel), two Fischers and a dozen others enhanced the pearls tradition of presenting nuggets of knowledge encased in humor. The use of art forms and literary devices reached new heights as the pearls included four poems, a short story and two presentations with background music. Supporting data were drawn from sources such as Sir William Osler, the Bible and Doonesbury.

Dr. William Blythe ('51), professor of medicine, shared an experience in which he was able to save someone from -- as opposed to *with* -- the Heimlich maneuver.

He was in a restaurant when a fellow patron slumped over. While a "strong, burley man" administered "pulsating bear hugs," Blythe asked the victim's companion what the unfortunate individual had been eating. Learning that the victim had had nothing to eat, Blythe determined that fainting, rather than choking, was the problem. He further surmised that the Heimlich maneuver was making the situation worse.

"Never underestimate the value of taking a history," Blythe concluded.

Dr. Newton Fischer, Thomas J. Dark distinguished professor of surgery, demonstrated different types of wheezing caused by respiratory distress other than asthma. In diagnosis, he said, get the patient to cough. "You'll find it builds up your immunity," he added.

Dr. James Donahue, assistant professor of medicine, described three groups of "tricky patients." The third type, he noted, includes "those drug abusers that illicitly inject intravenously tablets which were intended for oral drug abuse."

Dr. Henry Lesesne (HS '70), associate professor of medicine, noted the importance Sir William Osler placed on studying the Bible. Lesesne then shared "some medical wisdom I have found in the Bible."

After presenting biblical advice on matters such as personal cleanliness, pure water supply, sewage disposal, early burial and pure foods, the physician concluded, tongue devoutly in cheek, that the Bible forbids surgery: "What God has joined together, let no man put asunder."

Here are some other salient pearls of wisdom shared with the soon-to-be physicians:

"Drugs are dangerous, especially if you are old." -- Dr. James Bryan, professor of medicine

"I think the U.S. possesses the resources to provide the best medical care in the world. Unfortunately, whether a person gets good care seems to be predicated on three things. Those who can pay, those who can manipulate our system and those who have severe illnesses usually get good care. The flip side is that the poor and the ignorant who stay reasonably well frequently get little or no medical care." -- Dr. Floyd Denny, alumni distinguished professor of pediatrics

"We should not be disease oriented... we should be patient oriented." -- Dr. Janet Fischer, Sarah Graham Kenan professor of medicine

"It's not what happens to you that is important. It is what you think about what happens to you that really matters." -- Dr. William Bakewell, professor of psychiatry (drawing from the Greek Stoic Epictetus)

"Gentleness and compassion are the absolute requirements of the truly great physician. Nothing is so strong as gentleness and nothing is so gentle as real strength." Dr. Paul Biggers ('63), J.P. Riddle distinguished professor of surgery. □

Calendar

Medical alumni activities

March		
25	Visiting Committee meeting	Chapel Hill
25-26	Medical Alumni Weekend	Chapel Hill

Continuing education

November		
15-18	Department Residency Administration Workshop	Holiday Inn, Chapel Hill
19-20	Carolina Ocutome Workshop	Berryhill Hall
December		
4	Residents' Day in Ophthalmology	Berryhill Hall
1983		
January-February	First District Medical Society Postgraduate Course	TBA
January		
6	N.C. Neuro-ophthalmology Review	Berryhill Hall
14-16	Hypnosis and Heart Control	Sheraton Inn, Durham
19-21	Alcoholism: The Search for the Sources	Mission Valley Inn, Raleigh
February		
4-6	Nathan A. Womack Surgical Society	TBA
February-June	Internal Medicine Board Review Lecture Series	Berryhill Hall
March		
9-12	Internal Medicine 1983	Berryhill Hall
24-25	Seventh Annual Cancer Research Symposium	UNC-CH Clinic Auditorium
24-26	Gynecologic Surgery	Blockade Runner, Wrightsville Beach
April		
8-9	Carolina Ocutome Workshop	Berryhill Hall
20	Diabetes Update	Four Seasons, Greensboro
May		
13-15	Seventh Annual Radiology Symposium	Hilton Head, Island, S.C.
20-26	British-American Case Conference	London, England
23-25	Pediatric Symposium in Physical Therapy	Berryhill Hall

For more information about C.M.E. courses, contact the Office of Continuing Medical Education, 231 MacNider 202H, Chapel Hill, N.C. 27514 (919) 962-2118.

Medical Alumni Bulletin
231 MacNider Hall 202A
Chapel Hill, N.C. 27514

Nonprofit Organization
U.S. Postage
PAID
Chapel Hill, N.C.
Permit No. 24

RECEIVED
NOV 30 1982
HEALTH SCIENCES LIBRARY

Medical Alumni Weekend
March 25-26, 1983

H SCIENCES LIBRARY 223H
AMPUS